

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000107167

**Entity Name:** ESPER, LLC

**Current Principal Place of Business:**

9695 W. BROWARD BLVD.  
PLANTATION, FL 33324

**Current Mailing Address:**

9695 W. BROWARD BLVD.  
PLANTATION, FL 33324 US

**FEI Number:** 90-0879882

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WILLIAMS, DOUGLAS W  
9695 W. BROWARD BLVD.  
PLANTATION, FL 33324 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name ESPER, LENICE  
Address AV. BERNARDINO DE CAMPOS, 243  
City-State-Zip: LORENA SP 12600--200

Title MGR  
Name ESPER, NILVA  
Address AV. HIGIENOPOLIS, 402, APT. 142  
City-State-Zip: SAO PAULO SP 01238--000

Title MGRM  
Name ESPER, CARLOS ALBERTO  
Address AV. BERNARDINO DE CAMPOS, 243  
City-State-Zip: LORENA SP 12600--200

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** NILVA ESPER

**MANAGER**

**02/06/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date