

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000146962

**Entity Name:** GIAMBRY BISCAYNE, LLC

**Current Principal Place of Business:**

1313 PONCE DE LEON BLVD, STE 301 CORAL GABLES  
MIAMI, FL 33134-3343

**Current Mailing Address:**

P. O BOX 414932  
MIAMI BEACH, FL 33141 US

**FEI Number:** 46-1543777

**Certificate of Status Desired:** No

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

GUILLERMO PESANT, P.A.  
1313 PONCE DE LEON BLVD  
SUITE 301  
CORAL GABLES, FL 33134 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           | MGR                 | Title           | M              |
| Name            | GIAMBRONE, MAURIZIO | Name            | MEJIAS, YAMILE |
| Address         | 7815 CORAL WAY      | Address         | 7815 CORAL WAY |
| City-State-Zip: | MIAMI FL 33155      | City-State-Zip: | MIAMI FL 33155 |

*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:** MAURIZIO GIAMBRONE

MR

08/02/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date