

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000061816

**Entity Name:** MRE7C, LLC

**Current Principal Place of Business:**

510 SHOTGUN ROAD  
NO. 140  
SUNRISE, FL 33326

**Current Mailing Address:**

510 SHOTGUN ROAD  
NO. 140  
SUNRISE, FL 33326 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

MARRERO, JOSE C  
1200 BRICKELL AVENUE  
NO. 505  
MIAMI, FL 33131 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  
Name ALONSO CEVALLOS, MAURA C  
Address 510 SHOTGUN ROAD  
NO. 140  
City-State-Zip: SUNRISE FL 33326

Title MGR  
Name ALONSO CEVALLOS, MANUEL R  
Address 510 SHOTGUN ROAD  
NO. 140  
City-State-Zip: SUNRISE FL 33326

Title MGRM  
Name ALLCAY HOLDINGS INC.  
Address 510 SHOTGUN RD. #140  
City-State-Zip: SUNRISE FL 33326

Title MGR  
Name CEVALLOS, LUZ MARINA  
Address 1200 BRICKELL AVENUE, NO. 505  
City-State-Zip: MIAMI FL 33131

*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:** MAURA C ALONSO CEVALLOS

MGR

04/28/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date