

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000110469

**Entity Name:** UNITED LANGUAGES OF AMERICA, LLC

**Current Principal Place of Business:**

5950 LAKEHURST DRIVE  
SUITE #169  
ORLANDO, FL 32819

**FILED**  
**Mar 16, 2016**  
**Secretary of State**  
**CC3326588133**

**Current Mailing Address:**

5950 LAKEHURST DRIVE  
SUITE #169  
ORLANDO, FL 32819 US

**FEI Number: 46-4784012**

**Certificate of Status Desired: No**

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

SHINDOLL, FLORALEE A  
4601 JUDY COURT  
ORLANDO, FL 32839 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            PRESIDENT  
Name            ANTHONY B. PORTIGLIATTI  
Address        8812 ELLIOTTS COURT  
City-State-Zip: ORLANDO FL 32836

Title            SECRETARY  
Name            FERNANDA PORTIGLIATTI  
Address        8812 ELLIOTTS COURT  
City-State-Zip: ORLANDO FL 32836

Title            DIRECTOR  
Name            STEFANO PORTIGLIATTI  
Address        8812 ELLIOTTS COURT  
City-State-Zip: ORLANDO FL 32835

Title            VP  
Name            BRUNO PORTIGLIATTI  
Address        4412 CONROY CLUB DRIVE  
City-State-Zip: ORLANDO FL 32835

*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: ANTHONY B. PORTIGLIATTI**

**PRESIDENT**

**03/16/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date