

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000172960

Entity Name: GI SHAVINGS LLC

Current Principal Place of Business:

26444 COUNTRY ROAD 33
OKAHUMPKA, FL 34762

Current Mailing Address:

1150 E. HALLANDALE BEACH BLVD
B
HALLANDALE, FL 33009 US

FEI Number: 30-0938803

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MONCARZ, CLAUDIA
1150 E. HALLANDALE BEACH BLVD
B
HALLANDALE, FL 33009 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 IADISERNIA, GIUSEPPE
Address 1150 E. HALLANDALE BEACH BLVD
B
City-State-Zip: HALLANDALE FL 33009

Title MGR
Name IADISERNIA, MIREYA
Address 1150 E. HALLANDALE BEACH BLVD
B
City-State-Zip: HALLANDALE FL 33009

Title MANAGER
Name CORONADO, ALEXIS E
Address 1150 E. HALLANDALE BEACH BLVD
B
City-State-Zip: HALLANDALE FL 33009

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: GIUSEPPE IADISERNIA

MANAGER

04/28/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date