

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000048608

**Entity Name:** CONCH FLYER CONCESSIONS, LLC

**Current Principal Place of Business:**

KEY WEST INTERNATIONAL AIRPORT  
SUITE 107  
KEY WEST, FL 33040

**Current Mailing Address:**

KEY WEST INTERNATIONAL AIRPORT  
SUITE 107  
KEY WEST, FL 33040

**FEI Number:** 46-5194165

**Certificate of Status Desired:** No

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

VILA, PADRON & DIAZ, P.A.  
201 ALHAMBRA CIRCLE  
SUITE 702  
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 MGRM  
Name ALBERNI, WILLIAM  
Address 6145 SW 27 ST  
City-State-Zip: MIAMI FL 33155

Title MGR  
Name AMARO, PEDRO JR.  
Address MIAMI INTL AIRPORT, CONCOURSE F,  
3RD LEVEL  
City-State-Zip: MIAMI FL 33122

*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:** PEDRO AMARO JR

**MANAGER**

**02/04/2016**

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

\_\_\_\_\_  
Date