

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000002630

**Entity Name:** P & C AT ENCLAVE, LLC

**Current Principal Place of Business:**

18483 SW 7TH STREET  
PEMBROKE PINES, FL 33029

**Current Mailing Address:**

18483 SW 7TH STREET  
PEMBROKE PINES, FL 33029

**FEI Number:** 47-2725859

**Certificate of Status Desired:** No

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

ACCOUNTAX OFFICE SERVICES, CORP.  
7590 NW 186 STREET  
206A  
MIAMI, FL 33015 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 AMBR  
Name PADILLA, JOSE ANTONIO  
Address 18483 SW 7TH STREET  
City-State-Zip: PEMBROKE PINES FL 33029

Title AMBR  
Name CITTADINO DE PADILLA, ANA MARIA  
Address 18483 SW 7TH STREET  
City-State-Zip: PEMBROKE PINES FL 33029

Title AMBR  
Name PADILLA CITTADINO, JOSE A  
Address 18483 SW 7TH STREET  
City-State-Zip: PEMBROKE PINES FL 33029

Title AMBR  
Name PADILLA, MARIANA A  
Address 18483 SW 7TH STREET  
City-State-Zip: PEMBROKE PINES FL 33029

*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:** JOSE ANTONIO PADILLA

AMBR

05/29/2020

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

\_\_\_\_\_  
Date