

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000024552

Entity Name: LISBOA & LEAL LLC

Current Principal Place of Business:

6159 METROWEST BLVD APT 102
ORLANDO, FL 32835

Current Mailing Address:

6159 METROWEST BLVD APT 102
ORLANDO, FL 32835 US

FEI Number: 47-3116179

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LISBOA LEAL, SHIRLEI
6159 METROWEST BLVD APT 102
ORLANDO, FL 32835 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	Title	AMBR
Name	LISBOA LEAL, SHIRLEI	Name	PITER LEAL, MICHAEL
Address	6159 METROWEST BLVD APT 102	Address	6159 METROWEST BLVD APT 102
City-State-Zip:	ORLANDO FL 32835	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: LISBOA LEAL , SHIRLEI

AMBR

04/11/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date