

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000134404

**Entity Name:** AP CONCEPT GROUP, LLC

**Current Principal Place of Business:**

801 BRICKELL KEY BLVD, APT #3205  
MIAMI, FL 33131

**Current Mailing Address:**

801 BRICKELL KEY BLVD, APT #3205  
MIAMI, FL 33131

**FEI Number:** 47-4755343

**Certificate of Status Desired:** No

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

CABANAS & ASSOCIATES, P.A.  
10520 NW 26TH STREET, SUITE #C201  
DORAL, FL 33172 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	MERCADO, ALVARO	Name	SANTOS, PABLO
Address	801 BRICKELL KEY BLVD, APT #3205	Address	801 BRICKELL KEY BLVD, APT #3205
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131

*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:** ALVARO MERCADO

**MEMBER**

**04/27/2016**

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

\_\_\_\_\_  
Date