

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000148039

**Entity Name:** ALPHA BUSINESS & TOURISM LLC

**Current Principal Place of Business:**

5401 S KIRKMAN RD  
STE 135  
ORLANDO, FL 32819

**Current Mailing Address:**

5401 S KIRKMAN RD  
STE 135  
ORLANDO, FL 32819 US

**FEI Number:** 38-3977969

**Certificate of Status Desired:** No

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

US TAX CONSULTING INC  
5401 S KIRKMAN RD  
STE 135  
ORLANDO, FL 32819 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 BRAVO, JULIO ANTONIO  
Address RUA JOAO CARLOS DE SOUZA  
CASIRO 358 CASA 4  
City-State-Zip: CURITIBA PR 81520-290

Title AMBR  
Name TABARELLI COCICOV, ANTONIO L  
Address RUA VIRGINIA DALABONA 1202 CASA  
80  
City-State-Zip: CURITIBA PR 82331-0390

*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:** JULIO ANTONIO BRAVO

AMBR

04/12/2016

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

\_\_\_\_\_  
Date