

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000155097

**Entity Name:** ANFRANPE, LLC

**Current Principal Place of Business:**

14750 NW 77 COURT  
SUITE 300  
MIAMI LAKES, FL 33016

**Current Mailing Address:**

14750 NW 77 COURT  
SUITE 300  
MIAMI LAKES, FL 33016 US

**FEI Number:** 47-5146875

**Certificate of Status Desired:** No

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

LOURDES CORVO, P.A.  
14750 NW 77 COURT  
SUITE 300  
MIAMI LAKES, FL 33016 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 MGR  
Name SUASTEGUI JIMENEZ, CAROLINA L  
Address 964 SW 147TH AV  
City-State-Zip: PEMBROKE PINES FL 33027

Title AMBR  
Name MARAZITA ESPINAR, JOSE A  
Address 964SW 147TH AV  
City-State-Zip: PEMBROKE PINES FL 33027

*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:** SUASTEGUI JIMENEZ CAROLINA

**MANAGER**

**01/11/2017**

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

\_\_\_\_\_  
Date