

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000177620

**Entity Name:** CASTROGONZALEZ, LLC

**Current Principal Place of Business:**

5300 NW 49TH AVENUE  
COCONUT CREEK, FL 33073

**Current Mailing Address:**

5300 NW 49TH AVENUE  
COCONUT CREEK, FL 33073

**FEI Number: 30-0892238**

**Certificate of Status Desired: No**

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

CALDERARO, SANDRA R  
6301 NW 5TH WAY  
SUITE 2000  
FORT LAUDERDALE, FL 33309 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            GONCAST GROUP LLC  
Address        5300 NW 49TH AVENUE  
City-State-Zip: COCONUT CREEK FL 33073

Title            MGR  
Name            CASTRO LLANOS, MARIA A  
Address        5300 NW 49TH AVENUE  
City-State-Zip: COCONUT CREEK FL 33073

*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: MARIA ALEJANDRA CASTRO LLANOS**

**MANAGER**

**04/27/2016**

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

\_\_\_\_\_  
Date