

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000198274

**Entity Name:** MONAGAS TAX, LLC

**Current Principal Place of Business:**

7281 SUNSHINE GROVE ROAD  
SUITE 110  
BROOKSVILLE, FL 34613

**Current Mailing Address:**

7281 SUNSHINE GROVE ROAD  
SUITE 110  
BROOKSVILLE, FL 34613 US

**FEI Number:** 47-5662984

**Certificate of Status Desired:** No

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

MONAGAS, STEPHEN  
4361 RADCLIFFE DRIVE  
PALM HARBOR, FL 34685 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 AP  
Name MONAGAS, COLLEEN  
Address 4361 RADCLIFFE DRIVE  
City-State-Zip: PALM HARBOR FL 34685

Title MANAGING MEMBER  
Name MONAGAS, STEPHEN  
Address 7281 SUNSHINE GROVE ROAD  
SUITE 110  
City-State-Zip: BROOKSVILLE FL 34613

*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:** STEPHEN MONAGAS

MANAGING MEMBER

04/17/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date