

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000035805

**Entity Name:** IMPRESS SIGNS AND GRAPHICS LLC

**Current Principal Place of Business:**

10977 49TH STREET N  
UNIT 1  
CLEARWATER, FL 33762

**Current Mailing Address:**

10977 49TH STREET N  
UNIT 1  
CLEARWATER, FL 33762

**FEI Number:** 81-1545309

**Certificate of Status Desired:** No

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

STOJANOVIC, SLADJAN  
895 NORTH VILLAGE DR N  
107  
SAINT PETERSBURG, FL 33716 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 STOJANOVIC, SLADJAN  
Address 895 NORTH VILLAGE DR N, UNIT 107  
City-State-Zip: SAINT PETERSBURG FL 33716

*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:** SLADJAN STOJANOVIC

**MANAGER**

**04/30/2018**

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

\_\_\_\_\_  
Date