# 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000073092

Entity Name: FOUR HEADS LLC

#### **Current Principal Place of Business:**

3111 N UNIVERSITY DR STE 105 CORAL SPRINGS, FL 33065

## **Current Mailing Address:**

3111 N UNIVERSITY DR STE 105 CORAL SPRINGS, FL 33065 US

# FEI Number: 37-1824787

## Name and Address of Current Registered Agent:

ACCOUNTANT & MANAGEMENT INC 1549 NE 123RD ST NORTH MIAMI, FL 33161 US Certificate of Status Desired: No

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

## Authorized Person(s) Detail :

Title	AMBR	Title	AMBR
Name	SANGIORGIO, PABLO J	Name	SANGIORGIO, AGUSTIN
Address	3111 N UNIVERSITY DR STE 105	Address	3111 N UNIVERSITY DR STE 105
City-State-Zip:	CORAL SPRINGS FL 33065	City-State-Zip:	CORAL SPRINGS FL 33065
Title	AMBR	Title	AMBR
Title Name	AMBR SANGIORGIO, MANUEL	Title Name	AMBR SANGIORGIO, TOMAS
Name	SANGIORGIO, MANUEL	Name	SANGIORGIO, TOMAS

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: PABLO SANGIORGIO

AMBR

01/26/2017

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date