

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000183140

**Entity Name:** ALBFRED LLC

**Current Principal Place of Business:**

2210 GRAND CAYMAN CT  
1727  
KISSIMMEE, FL 34741

**Current Mailing Address:**

2210 GRAND CAYMAN CT  
1727  
KISSIMMEE, FL 34741 US

**FEI Number:** 81-4500077

**Certificate of Status Desired:** No

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

ALVAREZ, ALBERTO  
2210 GRAND CAYMAN CT  
APT 1727  
KISSIMMEE, FL 34741 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 ALVAREZ, ALBERTO  
Address 2210 GRAND CAYMAN CT, APT 1727  
City-State-Zip: KISSIMMEE FL 34741

Title MGR  
Name MARIN, YOVANNA  
Address 2210 GRAND CAYMAN CT, APT 1727  
City-State-Zip: KISSIMMEE FL 34741

Title MANAGER  
Name VESPA, JOSE MIGUEL  
Address 1634 FAIRFIELD CIR  
City-State-Zip: PALM BAY FL 32905

Title MANAGER  
Name AMARO, HILDA MIRINEL  
Address 1634 FAIRFIELD CIR  
City-State-Zip: PALM BAY FL 32905

*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:** ALBERTO ALVAREZ

**MANAGER**

**01/03/2017**

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

\_\_\_\_\_  
Date