

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000211988

**Entity Name:** ACAI CONCEPT LLC

**Current Principal Place of Business:**

6278 N FEDERAL HWY  
SUITE 104  
FORT LAUDERDALE, FL 33308

**Current Mailing Address:**

6278 N FEDERAL HWY  
SUITE 104  
FORT LAUDERDALE, FL 33308 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

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

TAXMAN FIRM LLC  
433 PLAZA REAL  
SUITE 275  
BOCA RATON, FL 33432 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 DE BARROS T DA SILVA, AUGUSTO MIGUEL M  
Address 6278 N FEDERAL HWY, 104  
City-State-Zip: FORT LAUDERDALE FL 33308

Title AMBR  
Name BEZERRA DE MELO, RODRIGO C  
Address 6278 N FEDERAL HWY, 104  
City-State-Zip: FORT LAUDERDALE FL 33308

Title AMBR  
Name MENDES ROCHA, LUIZ ARTUR  
Address 6278 N FEDERAL HWY SUITE 104  
City-State-Zip: FORT LAUDERDALE FL 33308

Title AMBR  
Name CARNEIRO DE ALMEIDA, JOSE G  
Address 6278 N FEDERAL HWY SUITE 104  
City-State-Zip: FORT LAUDERDALE FL 33308

*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:** LUIZ ARTUR MENDES ROCHA

**PRESIDENT**

**06/29/2020**

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

\_\_\_\_\_  
Date