

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000229603

**Entity Name:** TOSCANO INVESTMENTS SERVICES AND MANAGEMENT  
GROUP LLC

**FILED**  
**May 01, 2017**  
**Secretary of State**  
**CC3962370691**

**Current Principal Place of Business:**

18851 NE 29TH AVE  
STE 710  
AVENTURA, FL 33180

**Current Mailing Address:**

18851 NE 29TH AVE  
STE 710  
AVENTURA, FL 33180 US

**FEI Number: 81-4755849**

**Certificate of Status Desired: No**

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

GFS TAX & ACCOUNTING SERVICES  
2005 W CYPRESS CREEK RD  
SUITE 100  
FT LAUDERDALE, FL 33309 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 MOURA, ANNA T  
Address 12692 LITTLE PALM LN  
City-State-Zip: BOCA RATON FL 33428

Title AMBR  
Name ANNA KARINA TOSCANO DE MOURA-  
EPP  
Address RUA VIDAL DE NEGREIROS 240  
City-State-Zip: CARUARU 55004--430

*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: ANNA T DE MOURA**

**AMBR**

**05/01/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date