

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000042642

**Entity Name:** PENA'S CUSTOM CABINETS LLC

**Current Principal Place of Business:**

1698 SE S NIEMEYER CIR  
PORT ST LUCIE, FL 34952

**Current Mailing Address:**

1698 SE SOUTH NIEMEYER CIRCLE  
PORT ST LUICE, FL 34952 UN

**FEI Number:** 81-5451390

**Certificate of Status Desired:** Yes

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

PENA, HECTOR R SR.  
1801 SW HAMPSHIRE LANE  
PORT ST LUICE, FL 34953 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	Title	MGR
Name	PENA, EDGARDO	Name	PENA, HECTOR R SR
Address	1801 SW HAMPSHIRE LANE	Address	1801 SW HAMPSHIRE LANE
City-State-Zip:	PORT ST LUICE FL 34953	City-State-Zip:	PORT ST LUICE FL 34953

*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:** EDGARDO PENA

MGR

03/29/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date