

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000046529

**Entity Name:** ALSEINOVATT SERVICES GROUP LLC

**Current Principal Place of Business:**

10350 NW 70 TERRACE  
DORAL, FL 33178

**Current Mailing Address:**

10350 NW 70 TERRACE  
DORAL, FL 33178 US

**FEI Number:** 82-0680026

**Certificate of Status Desired:** No

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

TAX CARE DORAL  
1400 NW, 107TH AVE.  
SUITE 430  
SWEETWATER, FL 33172 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:** GABRIEL HATEM

04/30/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MBR	Title	MBR
Name	SEGOVIA, JUSTO	Name	ALONZO, IVEANNE
Address	10350 NW 70 TERRACE	Address	10350 NW 70 TERRACE
City-State-Zip:	DORAL FL 33178	City-State-Zip:	DORAL FL 33178
Title	MGR		
Name	SEGOVIA, CARLOS		
Address	10350 NW 70 TERRACE		
City-State-Zip:	DORAL FL 33178		

*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:** JUSTO SEGOVIA

MBR

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date