

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000063252

**Entity Name:** LAZZARA OMBRES ARCHITECTS LLC

**Current Principal Place of Business:**

501 S. DAKOTA AVE  
TAMPA, FL 33606

**Current Mailing Address:**

501 S. DAKOTA AVE  
TAMPA, FL 33606

**FEI Number: 82-1031894**

**Certificate of Status Desired: No**

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

OMBRES, IAN  
3010 W SAN RAFAEL  
TAMPA, FL 33629 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	OMBRES, IAN	Name	LAZZARA, JOSEPH M
Address	3010 W SAN RAFAEL ST	Address	3618 E CLARK CIRCLE
City-State-Zip:	TAMPA FL 33629	City-State-Zip:	TAMPA FL 33629

*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: IAN OMBRES**

**MGR**

**04/21/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date