

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000007382

**Entity Name:** ALCANTARA & PICCININI, LLC

**Current Principal Place of Business:**

4741 TERRASONESTA DR  
DAVENPORT, FL 33837

**Current Mailing Address:**

3599 CONROY RD  
APT 924  
ORLANDO, FL 32839 US

**FEI Number:** 82-3966075

**Certificate of Status Desired:** No

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

DOMINIUM CONSULTING SERVICES, LLC  
6965 PIAZZA GRANDE AVE  
SUITE 206  
ORLANDO, FL 32835 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 PICCININI, JOSE ANGELO  
Address 3599 CONROY RD - APT 924  
City-State-Zip: ORLANDO FL 32839

Title AMBR  
Name ALCANTARA PICCININI, MARILENE DE F.  
Address 3599 CONROY RD - APT 924  
City-State-Zip: ORLANDO FL 32839

Title AMBR  
Name DE A. PICCININI , ISABELA  
Address 3599 CONROY RD - APT 924  
City-State-Zip: ORLANDO FL 32839

Title AMBR  
Name DE A. PICCININI , NATHALIA  
Address 3599 CONROY RD - APT 924  
City-State-Zip: ORLANDO FL 32839

*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:** JOSE ANGELO PICCININI

AMBR

05/01/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date