

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000098107

**Entity Name:** MONTEC PROFESSIONAL SERVICES LLC

**Current Principal Place of Business:**

4201 SUMMIT CREECK BLVD  
# 301  
ORLANDO, FL 32837

**Current Mailing Address:**

5519 MYRTLE PINE LN  
WINTER GARDEN, FL 34787 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

FONTES MONTEIRO, ROBSON  
5519 MYRTLE PINE LN  
WINTER GARDEN, FL 34787 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 MGRM  
Name FONTES MONTEIRO, ROBSON  
Address 2143 S CONWAY RD APT # 1702  
City-State-Zip: ORLANDO FL 32812

Title MGRM  
Name MONTEIRO, RICARDO  
Address 5519 MYRTLE PINE LN  
City-State-Zip: WINTER GARDEN FL 34787

*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:** RICARDO MONTEIRO

MGRM

04/23/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date