

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000148184

**Entity Name:** B&A MLC 1, LLC

**Current Principal Place of Business:**

9760 SW 121ST STREET  
MIAMI, FL 33176

**Current Mailing Address:**

9760 SW 121ST STREET  
MIAMI, FL 33176 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

SCALLA, ALBERT  
9760 SW 121ST STREET  
MIAMI, FL 33176 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 SCALLA, ALBERT  
Address 9760 SW 121ST STREET  
City-State-Zip: MIAMI FL 33176

Title AR  
Name SCALLA, BARBARA  
Address 9760 SW 121ST STREET  
City-State-Zip: MIAMI FL 33176

Title AR  
Name SCALLA, CHRISTIAN A  
Address 9760 SW 121ST STREET  
City-State-Zip: MIAMI FL 33176

Title AR  
Name SCALLA, PAOLO A  
Address 9760 SW 121ST STREET  
City-State-Zip: MIAMI FL 33176

Title AR  
Name SCALLA, MATTEO A  
Address 9760 SW 121ST STREET  
City-State-Zip: MIAMI FL 33176

*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:** ALBERT SCALLA

AMBR

02/18/2019

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date