

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000196214

Entity Name: AMERICANNA LABORATORIES LLC

Current Principal Place of Business:

4613 PHILIPS HWY
SUITE 205
JACKSONVILLE, FL 32207

Current Mailing Address:

4613 PHILIPS HWY
SUITE 205
JACKSONVILLE, FL 32207

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DITORE, BRIAN A
4613 PHILIPS HWY
SUITE 205
JACKSONVILLE, FL 32207 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
Name DITORE, BRIAN A
Address 4613 PHILIPS HWY, #205
City-State-Zip: JACKSONVILLE FL 32207

Title MGR
Name PEREZ, ESTEBAN R SR
Address 4613 PHILIPS HWY, #205
City-State-Zip: JACKSONVILLE FL 32207

Title MGR
Name PEREZ, DAVID G
Address 4613 PHILIPS HWY
SUITE 205
City-State-Zip: JACKSONVILLE FL 32207

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: DAVID PEREZ

MGR

04/05/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date