

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000253948

**Entity Name:** ARGONAUT DESIGN AND DEVELOPMENT LLC

**Current Principal Place of Business:**

13300  
ATLANTIC BOULEVARD # 1813  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

13300  
ATLANTIC BOULEVARD # 1813  
JACKSONVILLE, FL 32225 UN

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: Yes**

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

REYES-PINTOR, CRISTIAN  
13300  
ATLANTIC BOULEVARD # 1813  
JACKSONVILLE, FL 32225 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 AR  
Name REYES-PINTOR, CRISTIAN  
Address 13300 ATLATNTIC BLVD. # 1813  
City-State-Zip: JACKSONVILLE FL 32225

Title MGR  
Name REYES-PINTOR, CRISTIAN  
Address 13300 ATLATNTIC BLVD. # 1813  
City-State-Zip: JACKSONVILLE FL 32225

Title MGR  
Name CABALLERO, EVELYN  
Address 13300 ATLATNTIC BLVD. # 1813  
City-State-Zip: JACKSONVILLE FL 32225

*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: CRISTIAN REYES-PINTOR**

**AR**

**04/29/2019**

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

\_\_\_\_\_  
Date