## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000260648

Entity Name: TECH SERVICES INTERNATIONAL, LLC

**FILED** Jun 30, 2020 Secretary of State 9364368502CC

**Current Principal Place of Business:** STREET LA REFORMA 114, PLAZA SAN BENITO,

OFFICE 1-1

SAN SALVADOR REPUBLIC OF EL

**Current Mailing Address:** 

801 US HIGHWAY 1

NORTH PALM BEACH, FL 33408 US

FEI Number: 84-3524337 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC. 801 US HIGHWAY 1 NORTH PALM BEACH, FL 33408 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:

Address

Date Electronic Signature of Registered Agent

Address

STREET LA REFORMA 114, PLAZA

Authorized Person(s) Detail:

Title MGR Title MGR

Name ROMERO MEMBRENO, DARWIN Name GIAMMATTEI LARIOS, JOSE LUIS

ISAAC

Address STREET LA REFORMA 114, PLAZA Address STREET LA REFORMA 114, PLAZA SAN BENITO, OFFICE 1-1

SAN BENITO, OFFICE1-1

SAN SALVADOR REPUBLIC OF EL City-State-Zip: SAN SALVADOR REPUBLIC OF EL City-State-Zip:

Title MGR

Title MGR PRADO, JAVIER Name

Name KENYON, SCOTT THATCHER

> STREET LA REFORMA 114, PLAZA SAN BENITO, OFFICE 1-1

SAN BENITO, OFFICE 1-1 SAN SALVADOR REPUBLIC OF EL

City-State-Zip: SAN SALVADOR REPUBLIC OF EL City-State-Zip:

Title MGR Title MGR

KRIETE SOL, FERNANDO Name SAMOUR, OSCAR Name

STREET LA REFORMA 114, PLAZA Address Address STREET LA REFORMA 114, PLAZA SAN BENITO,

SAN BENITO, OFFICE 1-1 OFFICE 1-1

SAN SALVADOR REPUBLIC OF EL City-State-Zip: City-State-Zip: SAN SALVADOR REPUBLIC OF EL

Title MBR

Name APP SOLUTIONS INTERNATIONAL INC

MMG TOWER, 23RD FLOOR, AVE. Address

PASEO DEL MAR, COSTA DEL ESTE

City-State-Zip: PANAMA CITY

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.

06/30/2020 SIGNATURE: PRADO, JAVIER **MGR** 

Electronic Signature of Signing Authorized Person(s) Detail

Date