

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M13000005159

Entity Name: MB4 COMMUNICATIONS, LLC**Current Principal Place of Business:**888 BRICKELL AVENUE, SUITE 400
MIAMI, FL 33131**Current Mailing Address:**888 BRICKELL AVENUE, SUITE 400
MIAMI, FL 33131**FEI Number:** 46-3288658**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CASTILLO, JAIME A
888 BRICKELL AVENUE, SUITE 400
MIAMI, FL 33131 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 MEZERHANE, NELSON J
Address 888 BRICKELL AVENUE, SUITE 400
City-State-Zip: MIAMI FL 33131

Title MGRM
Name MEZERHANE, MASHUD A
Address 888 BRICKELL AVENUE, SUITE 400
City-State-Zip: MIAMI FL 33131

Title MGRM
Name MEZERHANE, NELSON R
Address 888 BRICKELL AVENUE, SUITE 400
City-State-Zip: MIAMI FL 33131

Title MGRM
Name CASTILLO, JAIME A
Address 888 BRICKELL AVENUE, SUITE 400
City-State-Zip: MIAMI FL 33131

Title MGRM
Name PABON, GILDA
Address 888 BRICKELL AVENUE, SUITE 400
City-State-Zip: MIAMI FL 33131

Title MGRM
Name RIEBER, CAMILLE
Address 888 BRICKELL AVENUE, SUITE 400
City-State-Zip: MIAMI FL 33131

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: CASTILLO , JAIME A.**MGRM****04/04/2019**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date