

**LIMITED LIABILITY COMPANY
ANNUAL REPORT**

For Office Use Only

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DOCUMENT # **L10000052389**

1. Entity Name

PRONTO CLEANING SERVICES INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business - No P.O. Box #

1314 TERRE CIA AVE

3. Mailing Address

SAME

Suite, Apt. #, ect.

Suite, Apt. #, ect.

City & State

ORLANDO, FL

City & State

Zip

32807

Country

Zip

Country

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6.

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7. Name and Address of Current Registered Agent

Name

RAFAEL CAPELLAN

Street Address (P.O. Box Number is Not Acceptable)

1314 TERRE CIA AVE

City

ORLANDO

FL

Zip Code

32807

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

DATE

January 1 - May 1 Fee is \$138.75

After May 1, Fee is \$538.75

Amended AR is \$50.00

Make Check Payable to Florida Department of State

E-mail Address:

To be used for future annual report notices

9. MANAGING MEMBERS/MANAGERS

10.

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**President
Rafael Capellan
1314 TERRE CIA AVE
ORLANDO FL 32807**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**VP
Luciana Calcano
5908 ABERCORN DR
ORLANDO FL 32812**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes. The information on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in § 817.155, F.S.

SIGNATURE: **Rafael Capellan**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

JUNE 06 2011
Date Daytime Phone#