

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000035921

**Entity Name:** EAST COAST CAPITAL PARTNERS LLC

**Current Principal Place of Business:**

2655 LE JEUNE ROAD, SUITE 802  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2655 LE JEUNE ROAD, SUITE 802  
CORAL GABLES, FL 33134

**FEI Number:** 20-0269730

**Certificate of Status Desired:** No

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

GARCIA, DAVID RESQ  
GABLES INTERNATIONAL PLAZA  
2655 LE JEUNE ROAD, SUITE 802  
CORAL GABLES, FL 33134 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 GARCIA, JUAN E  
Address 11808 FOX BRIAR LAKE TRAIL  
City-State-Zip: BOYNTON BEACH FL 33473

Title MGRM  
Name GARCIA, FRANCES  
Address 11808 FOX BRIAR LAKE TRAIL  
City-State-Zip: BOYNTON BEACH FL 33473

*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:** JUAN E. GARCIA

MGRM

03/20/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date