

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000043832

**FILED**  
**Apr 18, 2016**  
**Secretary of State**  
**CC7639769640**

**Entity Name:** ALFA INVESTMENTS APARTMENTS, LLC

**Current Principal Place of Business:**

31781 CAMINO CAPISTRANO  
SUITE 107  
SAN JUAN CAPISTRANO , CA 92675

**Current Mailing Address:**

31781 CAMINO CAPISTRANO  
SUITE 107  
SAN JUAN CAPISTRANO , CA 92675 US

**FEI Number:** 47-0934475

**Certificate of Status Desired:** No

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

ALBERTO , MOBRICI  
1001 36TH STREET #M-33  
WEST PALM BEACH, FL 33407 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:** ALBERTO MOBRICI

04/18/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MOBRICI, ALBERTO MR.  
Address 31781 CAMINO CAPISTRANO  
SUITE 107  
City-State-Zip: SAN JUAN CAPISTRANO CA 92675

Title MANAGER  
Name RUSSO, ANA  
Address 31781 CAMINO CAPISTRANO  
SUITE 107  
City-State-Zip: SAN JUAN CAPISTRANO CA 92675

Title MGRM  
Name RUSSO, FABIO  
Address 31781 CAMINO CAPISTRANO  
SUITE 107  
City-State-Zip: SAN JUAN CAPISTRANO CA 92675

*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:** ALBERTO MOBRICI

**PRESIDENT**

04/18/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date