

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000048916

Entity Name: JULIUS C. MENDOZA, LLC

Current Principal Place of Business:

5517 US HWY 19
NEW PORT RICHEY, FL 34652

Current Mailing Address:

P.O. BOX 147
ARIPEKA, FL 34679 US

FEI Number: 87-0761046

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MENDOZA, JULIUS C
18824 ROSEMARY ROAD
ARIPEKA, FL 34679 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 MGR
Name MENDOZA, JULIUS C
Address 18824 ROSEMARY ROAD
City-State-Zip: ARIPEKA FL 34679

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: JULIUS MENDOZA

MGRM

04/30/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date