

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000052849

**FILED**  
**Mar 02, 2016**  
**Secretary of State**  
**CC7804952525**

**Entity Name:** TORRES PROPERTIES, LLC

**Current Principal Place of Business:**

4814 LONGWATER WAY  
TAMPA, FL 33615

**Current Mailing Address:**

4814 LONGWATER WAY  
TAMPA, FL 33615

**FEI Number:** 20-1397878

**Certificate of Status Desired:** No

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

TORRES, PEDRO L  
4814 LONGWATER WAY  
TAMPA, FL 33615 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	Title	MGRM
Name	TORRES, CHRISTINE	Name	TORRES, PEDRO
Address	4814 LONGWATER WAY	Address	4814 LONGWATER WAY
City-State-Zip:	TAMPA FL 33615	City-State-Zip:	TAMPA FL 33615

*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:** PEDRO TORRES

**MGR**

**03/02/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date