

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000116917

**Entity Name:** V.I.F. OF U.S.A. LLC

**Current Principal Place of Business:**

475 4TH STREET S  
SAFETY HARBOR, FL 34695

**Current Mailing Address:**

475 4TH STREET S  
SAFETY HARBOR, FL 34695 US

**FEI Number:** 20-4052278

**Certificate of Status Desired:** No

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

INGE, BOULOGNE A  
475 4TH STREET S  
SAFETY HARBOR, FL 34695 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:** INGE BOULOGNE

03/02/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name BOULOGNE, LOUIS VIDIAN  
Address 5630 WESTSHORE DRIVE  
City-State-Zip: NEW PORT RICHEY FL 34652

Title MGRM  
Name BOULOGNE, INGE ANNA  
Address 5630 WESTSHORE DRIVE  
City-State-Zip: NEW PORT RICHEY FL 34652

*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:** INGE ANNA BOULOGNE

MGRM

03/02/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date