

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000000789

**Entity Name:** ANTIGUA TOURS, LLC

**Current Principal Place of Business:**

744 LENOX AVENUE

#3

MIAMI BEACH, FL 33139

**Current Mailing Address:**

P O BOX 669004

A346

MIAMI SPRINGS, FL 33266

**FEI Number: 51-0623276**

**Certificate of Status Desired:** No

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

BELL, ELIZABETH

744 LENOX AVENUE

#3

MIAMI BEACH, FL 33139 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 BELL, ELIZABETH

Address 744 LENOX AVUENE APT 3

City-State-Zip: MIAMI BEACH FL 33139

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: ELIZABETH A. BELL**

**MGRM**

**01/24/2013**

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

\_\_\_\_\_  
Date