## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000069499

Entity Name: COSTA COLOR, LLC

## Current Principal Place of Business:

19995 SW 194 AVE MIAMI, FL 33187

## **Current Mailing Address:**

21800 SW 162 AVENUE MIAMI, FL 33170 US

# FEI Number: 27-2978634

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

DE OÑA, ARIANNA C. 21800 SW 162 AVENUE MIAMI, FL 33170 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.
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SIGNATURE	: ARIANNA C. DE OÑA			01/16/2020	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	MANAGER, EXECUTIVE VP	Title	MANAGER, PRESIDENT, CEO		
Name	COSTA, JOSE A. III	Name	SMITH, JOSE I. III		
Address	21800 SW 162 AVENUE	Address	21800 SW 162 AVENUE		
City-State-Zip:	MIAMI FL 33170	City-State-Zip:	MIAMI FL 33170		
Title	MANAGER, EXECUTIVE VP, TREASURER	Title	MANAGER, GENERAL COUNSI SENIOR VP, SECRETARY	ΞL,	
Name	SMITH, MARIA COSTA	Name	DE OÑA, ARIANNA C.		
Address	21800 SW 162 AVENUE	Address	21800 SW 162 AVENUE		
City-State-Zip:	MIAMI FL 33170	City-State-Zip:	MIAMI FL 33170		
Title Name Address	MANAGER, SENIOR VP LAFUENTE, JUAN 21800 SW 162 AVENUE	Title Name Address	MANAGER, CFO, SENIOR VP SIMARD-BROWN, MARIE-HELE 21800 SW 162 AVENUE	ENE	
City-State-Zip:	MIAMI FL 33170	City-State-Zip:	MIAMI FL 33170		

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: ARIANNA C. DE OÑA

MANAGER

01/16/2020 Date

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No