

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000105851

**Entity Name:** ANTONIO ANDUX & SON LLC

**Current Principal Place of Business:**

512 CAROLYNE ST  
TEMPLE TERRACE, FL 33617

**Current Mailing Address:**

512 CAROLYNE ST  
TEMPLE TERRACE, FL 33617 US

**FEI Number:** 30-0648726

**Certificate of Status Desired:** No

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

ANDUX, TONY C  
512 CAROLYNE ST  
TEMPLE TERRACE, FL 33617 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 ANDUX, ANTONIO  
Address 512 CAROLYNE ST  
City-State-Zip: TEMPLE TERRACE FL 33617

Title MGRM  
Name ANDUX, TONY C  
Address 512 CAROLYNE ST  
City-State-Zip: TEMPLE TERRACE FL 33617

*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:** TONY ANDUX

**OWNER**

**04/22/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date