

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000131000

**Entity Name:** A & S CAPELLI, LLC.

**Current Principal Place of Business:**

11532 NW 80TH ST  
MEDLEY, FL 33178

**Current Mailing Address:**

11532 NW 80TH ST  
MEDLEY, FL 33178 US

**FEI Number:** 35-2398151

**Certificate of Status Desired:** No

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

CAVADA-BARRERO, JOSE ANTONIO  
11532 NW 80TH ST  
MEDLEY, FL 33178 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           | MGR                  |
| Name            | CAVADA-BARRERO, JOSE ANTONIO | Name            | ALVES, HELOISA       |
| Address         | 17086 COLLINS AVENUE         | Address         | 17086 COLLINS AVENUE |
| City-State-Zip: | SUNNY ISLES FL 33160         | City-State-Zip: | SUNNY ISLES FL 33160 |

*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:** JOSE ANTONIO CAVADA-BARRERO

04/04/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date