

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000015519

**Entity Name:** RENATO J. AVES LLC

**Current Principal Place of Business:**

7720 W. WATERS AVENUE  
TAMPA, FL 33615

**Current Mailing Address:**

7720 W. WATERS AVENUE  
TAMPA, FL 33615 US

**FEI Number:** 27-5052527

**Certificate of Status Desired:** No

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

AVES, RENATO J  
132 BALTIC CIRCLE  
TAMPA, FL 33606 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           | AUTHORIZED MEMBER | Title           | OPERATIONS MANAGER   |
| Name            | AVES, RENATO J    | Name            | WANGELIN, JULIE M    |
| Address         | 132 BALTIC CIRCLE | Address         | 1564 SUNRAY DR       |
| City-State-Zip: | TAMPA FL 33606    | City-State-Zip: | PALM HARBOR FL 34683 |

*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:** JULIE WANGELIN

**OPERATIONS MANAGER** 01/29/2021

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

\_\_\_\_\_ Date