

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000016580

**Entity Name:** MANAGEMENT CAPITAL GROUP, LLC

**Current Principal Place of Business:**

2170 WEST STATE ROAD 434  
SUITE 350  
LONGWOOD, FL 32779

**Current Mailing Address:**

2170 WEST STATE ROAD 434  
SUITE 350  
LONGWOOD, FL 32779 US

**FEI Number:** 45-4445198

**Certificate of Status Desired:** No

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

TAX CARE INC  
2170 WEST STATE ROAD 434  
SUITE 350  
LONGWOOD, FL 32779 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:** MOISES ALVAREZ

04/18/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title P, T  
Name ALVAREZ, DANIEL  
Address 2170 WEST STATE ROAD 434  
SUITE 350  
City-State-Zip: LONGWOOD FL 32779

Title VP  
Name ALVAREZ, MOISES  
Address 2170 WEST STATE ROAD 434  
SUITE 350  
City-State-Zip: LONGWOOD FL 32779

*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:** ALVAREZ , DANIEL

P

04/18/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date