

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000143355

**FILED**  
**Jan 07, 2015**  
**Secretary of State**  
**CC9147190317**

**Entity Name:** SATELLITE BEACH CINEMAS LLC

**Current Principal Place of Business:**

1024 HIGHWAY A1A  
SUITE 136  
SATELLITE BEACH , FL 32937

**Current Mailing Address:**

1024 HIGHWAY A1A  
SUITE 136  
SATELLITE BEACH , FL 32937 US

**FEI Number:** 46-1376582

**Certificate of Status Desired:** No

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

BRIAN PRZYSTUP & ASSOCIATES LLC  
275 NE 18TH ST  
310  
MIAMI, FL 33132 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 SARASINO, ALEJANDRO  
Address 995 N. HIGHWAY A1A  
309  
City-State-Zip: INDIALANTIC FL 32903

Title MGR  
Name VACCA, OSVALDO L  
Address 335 RIDGEWOOD ROAD  
City-State-Zip: KEY BISCAYNE FL 33149

Title MGRM  
Name SARASINO, MARIA S  
Address 335 RIDGEWOOD ROAD  
City-State-Zip: KEY BISCAYNE FL 33149

*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:** ALEJANDRO SARASINO

**MGRM**

**01/07/2015**

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

\_\_\_\_\_  
Date