## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000032570

Entity Name: QUINTAES & ALMEIDA, LLC.

**Current Principal Place of Business:** 

5401 S KIRKMAN RD SUITE 135

ORLANDO, FL 32819

## **Current Mailing Address:**

5401 S KIRKMAN RD SUITE 135 ORLANDO, FL 32819 US

FEI Number: 90-0943888 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

US TAX CONSULTING INC 5401 S KIRKMAN RD SUITE 135 ORLANDO, FL 32819 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

FILED Apr 15, 2016

**Secretary of State** 

CC1275962292

Authorized Person(s) Detail:

Title MGRM Title MGRM

Name QUINTAES, JOSE LUIS L Name QUINTAES, MARCIA PAVAN D

Address 5401 S KIRKMAN RD Address 5401 S KIRKMAN RD

SUITE 135 SUITE 135

City-State-Zip: ORLANDO FL 32819 City-State-Zip: ORLANDO FL 32819

Title MGRM Title MGRM

Name QUINTAES, DANIELLE D Name QUINTAES, CAROLINE D

Address 5401 S KIRKMAN RD Address 5401 S KIRKMAN RD

SUITE 135 SUITE 135

City-State-Zip: ORLANDO FL 32819 City-State-Zip: ORLANDO FL 32819

Title MGRM Title MGRM

Name QUINTAES, ADRIANE D Name QUINTAES, GUILHERME D

Address 5401 S KIRKMAN RD Address 5401 S KIRKMAN RD

SUITE 135 SUITE 135

City-State-Zip: ORLANDO FL 32819 City-State-Zip: ORLANDO FL 32819

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: QUINTAES, JOSE LUIS L

MGRM

04/15/2016