

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000053729

**Entity Name:** EUROINTELLEDGENT LLC

**Current Principal Place of Business:**

6900 DANIEL'S PARKWAY  
34-37  
FORT MYERS, FL 33912

**Current Mailing Address:**

6900 DANIEL'S PARKWAY  
34-37  
FORT MYERS, FL 33912

**FEI Number:** 46-2517404

**Certificate of Status Desired:** No

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

BOSCO, MICHELE  
3652 BOCA CIEGA DR.  
NAPLES, FL 34112 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  
Name DOMINGUEZ, MONICA  
Address 11959 NICHOLSON DR.  
City-State-Zip: BATON ROUGE LA 70810

Title MGRM  
Name BOSCO, MICHELE  
Address 3652 BOCA CIEGA DR.  
City-State-Zip: NAPLES FL 34112

Title MGRM  
Name LANCELLOTTI, MICHAEL  
Address 6900 DANIEL'S PARKWAY SUITE37  
City-State-Zip: FORT MYERS FL 33912

Title MGRM  
Name BUCCINI, GRAZIANO  
Address 15328 BRIAR RIDGE CIRCLE  
City-State-Zip: FORT MYERS FL 33912

*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:** MICHELE BOSCO

MGRM

04/06/2014

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

\_\_\_\_\_  
Date