

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000081357

**Entity Name:** VICTORY INTERNATIONAL SERVICES LLC

**Current Principal Place of Business:**

10766 CRESCENDO CIRCLE  
BOCA RATON, FL 33498

**Current Mailing Address:**

10766 CRESCENDO CIRCLE  
BOCA RATON, FL 33498 US

**FEI Number:** 46-2916397

**Certificate of Status Desired:** No

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

SMART TAX  
535 E SAMPLE ROAD  
POMPANO BEACH, FL 33064 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 CALMON, ALBERICO P  
Address 10766 CRESCENDO CIRCLE  
City-State-Zip: BOCA RATON FL 33498

Title MGRM  
Name CALMON, ANDRESSA N  
Address 10766 CRESCENDO CIRCLE  
City-State-Zip: BOCA RATON FL 33498

Title AUTHORIZED MEMBER  
Name SANCHEZ, ADRIANE  
Address 4149 IXORA COURT N  
City-State-Zip: LAKE WORTH FL 33461

Title AUTHORIZED MEMBER  
Name MASCIMENTO, ALNICEA  
Address 4149 IXORA COURT N  
City-State-Zip: LAKE WORTH FL 33461

Title AUTHORIZED MEMBER  
Name LADEIRA, ALEXIA C  
Address 4149 IXORA COURT N  
City-State-Zip: LAKE WORTH FL 33461

*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:** ALBERICO P CALMON

**MGRM**

**01/21/2015**

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

\_\_\_\_\_  
Date