

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000133572

**Entity Name:** CITY TAXI 1, LLC

**Current Principal Place of Business:**

50989 HIGHWAY 27 LOT 242  
DAVENPORT, FL 33897

**Current Mailing Address:**

BOX 135031  
CLERMONT, FL 34713

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

AZAR, WILLIAM  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:** WILLIAM AZAR

01/16/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name AZAR, WILLIAM  
Address BOX 135031  
City-State-Zip: CLERMONT FL 34713

*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:** WILLIAM AZAR

OWNER

01/16/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date