

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000044090

**Entity Name:** CAPITAL PLUS LLC

**Current Principal Place of Business:**

1253 SW 46TH AVE.  
1610  
POMPANO BEACH, FL 33069

**Current Mailing Address:**

1253 SW 46TH AVE.  
1610  
POMPANO BEACH, FL 33069 US

**FEI Number:** 32-0441462

**Certificate of Status Desired:** No

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

REY, JUAN PABLO  
1253 SW 46TH AVE  
1610  
POMPANO BEACH, FL 33069 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 REY, JUAN PABLO  
Address 1253 SW 46TH AVE  
City-State-Zip: POMPANO BEACH FL 33069

Title AMBR  
Name CAPITAL PLUS S.A.S.  
Address CALLE 32 #22-140  
City-State-Zip: FLORIDABLANCA SANTANDER  
99999

*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:** JUAN PABLO REY

MGRM

04/22/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date