

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000071326

**Entity Name:** EXPERT IMMIGRATION SERVICES, LLC

**Current Principal Place of Business:**

18501 PINES BLVD  
SUITE 354  
PEMBROKE PINES, FL 33029

**Current Mailing Address:**

18501 PINES BLVD  
SUITE 354  
PEMBROKE PINES, FL 33029 US

**FEI Number:** 46-5558979

**Certificate of Status Desired:** No

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

AGUIRRE, FLOR  
18501 PINES BLVD  
SUITE 354  
PEMBROKE PINES, FL 33029 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 AMBR  
Name AGUIRRE, FLOR  
Address 18501 PINES BLVD  
SUITE 354  
City-State-Zip: PEMBROKE PINES FL 33029

Title AMBR  
Name FERNANDEZ, ZAIDE  
Address 18501 PINES BLVD  
SUITE 354  
City-State-Zip: PEMBROKE PINES FL 33029

*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:** ZAIDE FERNANDEZ

AMBR

03/18/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date