

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000109198

**Entity Name:** JACOB ABDEL PINA, LLC

**Current Principal Place of Business:**

605 W FLAGLER STREET  
MIAMI, FL 33130

**Current Mailing Address:**

605 W FLAGLER STREET  
MIAMI, FL 33130 UN

**FEI Number:** 47-1326896

**Certificate of Status Desired:** No

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

THOMAS G. SHERMAN, P.A.  
90 ALMERIA AVE.  
CORAL GABLES, FL 33134 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 CASTELLON, LOURDES  
Address 605 W FLAGLER STREET  
City-State-Zip: MIAMI FL 33130

Title MGR  
Name RODRIGUEZ, FRANCISCO  
Address 605 W FLAGLER STREET  
City-State-Zip: MIAMI FL 33130

*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:** FRANCISCO RODRIGUEZ

**MANAGER**

**03/20/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date