

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000114717

Entity Name: IMSIROVIC AND BROTHER LLC

Current Principal Place of Business:

549 OGLETHORPE ROAD
JACKSONVILLE, FL 32216

Current Mailing Address:

549 OGLETHORPE ROAD
JACKSONVILLE, FL 32216

FEI Number: 47-1795986

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

IMSIROVIC, HUSEIN
549 OGLETHORPE ROAD
JACKSONVILLE, FL 32216 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 MGR
Name IMSIROVIC, HUSEIN
Address 549 OGLETHORPE ROAD
City-State-Zip: JACKSONVILLE FL 32216

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: HUSEIN IMSIROVIC

MGR

03/18/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date