

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000131005

Entity Name: TAX AVENUE SERVICE BREAU LLC**Current Principal Place of Business:**16375 NE 18TH AVE
SUITE 204
NORTH MIAMI BEACH, FL 33162**Current Mailing Address:**16375 NE 18TH AVE
SUITE 204
NORTH MIAMI BEACH, FL 33162 US**FEI Number:** 47-1636691**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DAPHNIS, CLAUDE E
16375 NE 18TH AVE
SUITE 204
NORTH MIAMI BEACH, FL 33162 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:** CLAUDE E DAPHNIS

04/07/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	P
Name	DAPHNIS, JOVANN A
Address	16375 NE 18TH AVE SUITE 204
City-State-Zip:	NORTH MIAMI BEACH FL 33162

Title	AP
Name	MARC-DAPHNIS, BARBARA
Address	16375 NE 18TH AVE SUITE 204
City-State-Zip:	NORTH MIAMI BEACH FL 33162

Title	MGR
Name	ALZE, GERTRUDE
Address	16375 NE 18TH AVE SUITE 204
City-State-Zip:	NORTH MIAMI BEACH FL 33162

Title	VP
Name	DAPHNIS, HAKEEM A
Address	16375 NE 18TH AVE SUITE 204
City-State-Zip:	NORTH MIAMI BEACH FL 33162

Title	MANAGER
Name	DAPHNIS & DAPHNIS INVESTMENT GROUP LLC
Address	16375 NE 18TH AVE SUITE 204
City-State-Zip:	NORTH MIAMI BEACH FL 33162

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: GERTRUDE ALZE

MGR

04/07/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date