

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000001309

Entity Name: MASTERCRAFT REMODELING L.L.C.

Current Principal Place of Business:

535 MARLBOROUGH ST
A
OLDSMAR, FL 34677

Current Mailing Address:

535 MARLBOROUGH ST
A
OLDSMAR, FL 34677

FEI Number: 47-2749038

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAMI, ANGELO
209 ARLINGTON AVE. E.
OLDSMAR, FL 34677 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 MAMI, ANGELO
Address 209 ARLINGTON AVE E
City-State-Zip: OLDSMAR FL 34677

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: ANGELO MAMI

MNGR

03/03/2016

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date