

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000012685

Entity Name: TIRICORP LLC**Current Principal Place of Business:**2423 DEER CREEK RD
WESTON, FL 33327**Current Mailing Address:**2423 DEER CREEK RD
WESTON, FL 33327 US**FEI Number:** 81-1198171**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SILVAS FINANCIAL SERVICES, LLC
5220 S UNIVERSITY DR
STE C-102
DAVIE, FL 33328 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:** MARIO SILVA

05/01/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name CONDE, ARMANDO
Address 2423 DEER CREEK RD
City-State-Zip: WESTON FL 33327

Title MGR
Name RUSSIAN, ZULAY
Address 2423 DEER CREEK RD
City-State-Zip: WESTON FL 33327

Title MGR
Name MALARET, FRANK
Address 2423 DEER CREEK RD
City-State-Zip: WESTON FL 33327

Title MGR
Name MALARET, FRANCISCO
Address 2423 DEER CREEK RD
City-State-Zip: WESTON FL 33327

Title MGR
Name MALARET, ADRIANA
Address 2423 DEER CREEK RD
City-State-Zip: WESTON FL 33327

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: ZULAY RUSSIAN

MGR

05/01/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date