## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000117121

**Entity Name: GLOBALFACES LLC** 

**Current Principal Place of Business:** 

5401 S. KIKRMAN RD STE 135 ORLANDO, FL 32819 FILED Apr 18, 2017 Secretary of State CC0442936470

## **Current Mailing Address:**

5401 S. KIKRMAN RD STE 135 ORLANDO, FL 32819 US

FEI Number: 36-4839786 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

US TAX CONSULTING INC 5401 S. KIRKMAN RD STE 135 ORLANDO, FL 32819 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 Title AMBR

Name TENORIO, MARIA P Name TENORIO, ERALDO P

Address AV. SILVIO VIANNA 1675 APT 101 Address AV. SILVIO VIANNA 1675 APT 101

City-State-Zip: MACEIO AL 57035--160 City-State-Zip: MACEIO AL 57035--160

Title AMBR Title AMBR

Name TENORIO, VANESSA P Name VILLANOVA, CARLOS L

Address AV. ALVARO OTACILIO 374 APT 402 Address AV. ALVARO OTACILIO 374 APT 402

City-State-Zip: MACEIO AL 57035--180 City-State-Zip: MACEIO AL 57035--180

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.

Electronic Signature of Signing Authorized Person(s) Detail

**AMBR**