

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000171329

**Entity Name:** ABRAHAM DELIVERY SERVICES LLC

**Current Principal Place of Business:**

12502 TRAIL BLAZER LOOP  
304  
TAMPA, FL 33625

**Current Mailing Address:**

12502 TRAIL BLAZER LOOP  
304  
TAMPA, FL 33625 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

GARCIA, ABRAHAM  
12502 TRAIL BLAZER LOOP  
304  
TAMPA, FL 33625 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 GARCIA, ABRAHAM  
Address 12502 TRAIL BLAZER LOOP APT 304  
City-State-Zip: TAMPA FL 33625

*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:** ABRAHAM GARCIA

**PRESIDENT**

**04/12/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date