

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000177897

**Entity Name:** ANEWLYTICS LLC

**Current Principal Place of Business:**

200 SOUTH BISCAYNE BOULEVARD  
SUITE 2790  
MIAMI, FL 33131

**Current Mailing Address:**

200 SOUTH BISCAYNE BOULEVARD  
SUITE 2790  
MIAMI, FL 33131 US

**FEI Number:** 81-3952691

**Certificate of Status Desired:** No

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

PUIGMARTI, RAMCEY L SR.  
4835 HOLLYWOOD BOULEVARD  
SUITE 4  
MIAMI, FL 33021 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:** RAMCEY PUIGMARTI

05/01/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name KREFT, DORA A MS.  
Address CCCT, NIVEL C2, SECTOR YAREY,  
OFIC. PB01  
City-State-Zip: CARACAS MI 1064

Title MGR  
Name ESCOBAR, EDGAR E SR.  
Address CCCT, NIVEL C2, SECTOR YAREY,  
OFIC. PB01  
City-State-Zip: CARACAS MI 1064

Title MGR  
Name PUIGMARTI, RAMCEY L SR.  
Address AV. VITACURA 6844, PISO 2,  
VITACURA  
City-State-Zip: SANTIAGO RM 76405-38

*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:** RAMCEY PUIGMARTI

MGR

05/01/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date