

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000019501

**Entity Name:** ELITE SPRINKLER SERVICES LLC

**Current Principal Place of Business:**

6801 NW 15 ST  
PLANTATION, FL 33313

**Current Mailing Address:**

ELITE SPRINKLER SERVICES LLC  
PO BOX 770891  
CORAL SPRINGS, FL 33077 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

DEAN, XAVIER  
6801 NW 15 ST  
PLANTATION, FL 33313 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            COO  
Name            DEAN, XAVIER  
Address        6801 NW 15 ST  
City-State-Zip: PLANTATION FL 33313

*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:** XAVIER DEAN

COO

02/13/2019

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

\_\_\_\_\_  
Date