

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000044771

**Entity Name:** PRODUCCIONES EL RASTRO, LLC

**Current Principal Place of Business:**

1825 PONCE DE LEON BLVD  
SUITE 485  
CORAL GABLES, FL 33134

**Current Mailing Address:**

1825 PONCE DE LEON BLVD  
SUITE 485  
CORAL GABLES, FL 33134 US

**FEI Number:** 82-0791262

**Certificate of Status Desired:** No

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

INTEGRAL ACCOUNTING PARTNERS, CORP.  
12555 ORANGE DRIVE  
UNIT 4116  
DAVIE, FL 33330 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:** IRIS C FERNANDEZ

01/09/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name SCHARFENBERG, EWALD C  
Address 1825 PONCE DE LEON BLVD  
SUITE 485  
City-State-Zip: CORAL GABLES FL 33134

Title AMBR  
Name POLISZUK, JOSEPH  
Address 1825 PONCE DE LEON BLVD  
SUITE 485  
City-State-Zip: CORAL GABLES FL 33134

*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:** EWALD C SCHARFENBERG

MEMBER

01/09/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date