

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000096681

Entity Name: ALPHA VISUALS LLC

Current Principal Place of Business:

3520 NW 16 STREET
MIAMI, FL 33125

Current Mailing Address:

3520 NW 16 STREET
MIAMI, FL 33125 US

FEI Number: 82-5256323

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NEIRA, DAVID W
3520 NW 16 STREET
MIAMI, FL 33125 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
Name NEIRA, DAVID W
Address 3520 NW 16 STREET
City-State-Zip: MIAMI FL 33125

Title AUTHORIZED REPRESENTATIVE
Name SIBAJA, ADRIANA L
Address 3520 NW 16 STREET
City-State-Zip: MIAMI FL 33125

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: DAVID W NEIRA

AMBR

04/21/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date