## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000152348

Entity Name: W.A.R. PAVERS LLC

**Current Principal Place of Business:** 

5901 DOGWOOD DR #2

ORLANDO, FL 32807

**Current Mailing Address:** 

5901 DOGWOOD DR

#2

ORLANDO, FL 32807

FEI Number: 83-0994497 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAMIREZ, ALICIA C 5901 DOGWOOD DR

ORLANDO, FL 32807 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: ALICIA C RAMIREZ 05/01/2019

> Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title **AMBR** Title **AMBR** 

Name RAMIREZ, ALICIA A Name AGUILAR, WILSON A 5901 DOGWOOD DR # 2 Address 5901 DOGWOOD DR # 2 Address ORLANDO FL 32807 City-State-Zip: ORLANDO FL 32807 City-State-Zip:

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.

**FILED** May 01, 2019

**Secretary of State** 

9389988421CC