

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000208193

**Entity Name:** ANNUAL REPORT FILING SERVICES LLC

**Current Principal Place of Business:**

193 S STATE RD 7  
MARGATE, FL 33068

**Current Mailing Address:**

193 S STATE RD 7  
R.ESTEVEZ.8@ICLOUD.COM  
MARGATE, FL 33068

**FEI Number:** 83-1767176

**Certificate of Status Desired:** No

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

ESTEVEZ, REMMY  
193 S STATE RD 7  
MARGATE, FL 33068 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 MGR  
Name ESTEVEZ, REMMY  
Address 193 S STATE RD 7  
City-State-Zip: MARGATE FL 33068

*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:** REMMY ESTEVEZ

MGR

04/17/2019

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

\_\_\_\_\_  
Date