

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000220127

**Entity Name:** SALMER 4GROUP LLC

**Current Principal Place of Business:**

10605 HAMMOCKS BLVD  
APT 617  
MIAMI, FL 33196

**Current Mailing Address:**

10605 HAMMOCKS BLVD  
APT 617  
MIAMI, FL 33196 US

**FEI Number:** 83-1944991

**Certificate of Status Desired:** No

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

SALMERON, DAVID  
10605 HAMMOCKS BLVD  
APT 617  
MIAMI, FL 33196 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 SALMERON, DAVID  
Address 10605 HAMMOCKS BLVD APT 617  
City-State-Zip: MIAMI FL 33196

Title MANAGER  
Name SALMERON, QUIRIAC M  
Address 10605 HAMMOCKS BLVD  
APT 617  
City-State-Zip: MIAMI FL 33196

Title MANAGER  
Name SALMERON, ISAAC J  
Address 10605 HAMMOCKS BLVD  
APT 617  
City-State-Zip: MIAMI FL 33196

*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 SALMERON

MGR

04/29/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date