

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L99000007216

**Entity Name:** SANIGLAZE INTERNATIONAL, LLC

**Current Principal Place of Business:**

4526 LENOX AVE.  
JACKSONVILLE, FL 32205

**Current Mailing Address:**

P.O. BOX 37209  
JACKSONVILLE, FL 32236 US

**FEI Number:** 59-3635047

**Certificate of Status Desired:** No

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

ROSENBLOOM, PERCY III  
1847 WOODMERE DR.  
JACKSONVILLE, FL 32210 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 ROSENBLOOM, PERCY III  
Address 4526 LENOX AVE.  
City-State-Zip: JACKSONVILLE FL 32205

Title MGR  
Name MITCHELL, JOEL I  
Address 4526 LENOX AVE.  
City-State-Zip: JACKSONVILLE FL 32205

Title CFO  
Name PROCTOR, WILLIAM S  
Address 4526 LENOX AVE.  
City-State-Zip: JACKSONVILLE FL 32205

*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:** WILLIAM PROCTOR

CFO

01/09/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date