

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L99000008744

**Entity Name:** CISRA, LLC

**Current Principal Place of Business:**

4745 OAK FAIR BLVD.  
TAMPA, FL 33610

**Current Mailing Address:**

P.O. BOX 24282  
TAMPA, FL 33623 US

**FEI Number:** 59-3611278

**Certificate of Status Desired:** No

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

CISNEROS, FRANK G  
1600 SO. MAC DILL AVENUE # 203  
TAMPA, FL 33629 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 MGRM  
Name CISNEROS, FRANK G  
Address 1600 SO. MAC DILL AVENUE # 203  
City-State-Zip: TAMPA FL 33629

Title MGRM  
Name SIERRA, PAUL J  
Address 7208 SPRING VALLEY DRIVE  
City-State-Zip: TAMPA FL 33615

*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:** FRANK G. CISNEROS

**MANAGER**

**01/31/2020**

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

\_\_\_\_\_  
Date