

**2023 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A22000000693

**Entity Name:** R MIJARES FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP

**FILED**  
**Apr 19, 2023**  
**Secretary of State**  
**2353275373CC**

**Current Principal Place of Business:**

901 PONCE DE LEON BLVD., STE. 601  
CORAL GABLES, FL 33134

**Current Mailing Address:**

901 PONCE DE LEON BLVD., STE. 601  
CORAL GABLES, FL 33134 US

**FEI Number: 92-1344630**

**Certificate of Status Desired: Yes**

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

GARCIA VEGA, TANYA  
901 PONCE DE LEON BLVD., STE. 601  
CORAL GABLES, FL 33134 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

**General Partner Detail :**

Document #

Name MIJARES, RAMON TRUSTEE

Address 901 PONCE DE LEON BLVD., STE. 601

City-State-Zip: CORAL GABLES FL 33134

*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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: RAMON MIJARES**

**TRUSTEE**

**04/19/2023**

\_\_\_\_\_ Electronic Signature of Signing General Partner Detail

\_\_\_\_\_ Date