

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N23000002099

**Entity Name:** L@S INSOPORTABLES DE TAMPA BAY CORP.

**Current Principal Place of Business:**

1435 MAYBURY DR,  
HOLIDAY, FL 34691

**Current Mailing Address:**

1435 MAYBURY DR,  
HOLIDAY, FL 34691 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

ALICEA RODRIGUEZ, YARIL M  
1435 MAYBURY DR.  
HOLIDAY, FL 34691 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

**Officer/Director Detail :**

Title P  
Name ALICEA RODRIGUEZ, YARIL M  
Address 1435 MAYBURY DR.  
City-State-Zip: HOLIDAY FL 34691

Title VP  
Name FERNANDEZ, NICOLE  
Address 13601 VANDERBILT RD.  
City-State-Zip: ODESSA FL 33556

Title FO  
Name RIVERA DE ALEJANDRO, ZORARIS  
Address 3923 RIVVER OTTER LN.  
City-State-Zip: NEW PORT RICHEY FL 34653

Title SEC  
Name FIGUEROA, JEANNETTE  
Address 608 SHELLCRACKER CT.  
City-State-Zip: TAMPA FL 33613

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: RIVERA DE ALEJANDRO, ZORARIS**

**TREASURER**

**04/20/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date