

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000018766

**Entity Name:** LCLM2112 CORP.

**Current Principal Place of Business:**

1390 BRICKELL AVENUE, SUITE 104  
MIAMI, FL 33131

**Current Mailing Address:**

1390 BRICKELL AVENUE, SUITE 104  
MIAMI, FL 33131

**FEI Number:** 46-5013961

**Certificate of Status Desired:** No

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

CORPORATE MAINTENANCE SERVICES, LLC.  
1000 BRICKELL AVENUE, SUITE 400  
MIAMI, FL 33131 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            D  
Name            CADENAS, LILIANA B  
Address        1000 BRICKELL AVENUE #400  
City-State-Zip: MIAMI FL 33131

Title            DIRECTOR  
Name            MARCHETTI, CARLA  
Address        1000 BRICKELL AVENUE #400  
City-State-Zip: MIAMI FL 33131

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CADENAS , LILIANA B

D, CMS AUTH REP

03/08/2023

Electronic Signature of Signing Officer/Director Detail

Date