

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000068168

**Entity Name:** LARZABAL FAM CORP.**Current Principal Place of Business:**12240 SW 35 ST.  
MIAMI, FL 33175**Current Mailing Address:**12240 SW 35 ST.  
MIAMI, FL 33175 US**FEI Number:** 87-2000830**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LARZABAL, REGLA J  
12240 SW 35 ST.  
MIAMI, FL 33175 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	LARZABAL, REGLA J
Address	12240 SW 35 ST.
City-State-Zip:	MIAMI FL 33175

Title	VP
Name	LARZABAL, PETER P SR.
Address	12240 SW 35 ST.
City-State-Zip:	MIAMI FL 33175

Title	VP
Name	LARZABAL, ASHLEY C
Address	12240 SW 35 ST.
City-State-Zip:	MIAMI FL 33175

Title	VP
Name	LARZABAL, ANAIS C
Address	12240 SW 35 ST.
City-State-Zip:	MIAMI FL 33175

Title	VP
Name	LARZABAL, PETER P JR.
Address	12240 SW 35 ST.
City-State-Zip:	MIAMI FL 33175

*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:** ASHLEY LARZABAL

VP

04/14/2022

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