

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000015393

Entity Name: SOCRAB, L.L.C.**Current Principal Place of Business:**11236 NW 77TH TERR
DORAL, FL 33178**Current Mailing Address:**11236 NW 77TH TERR
DORAL, FL 33178 US**FEI Number:** 65-1061877**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PASTRAN, ADOLFO
11236 NW 77TH TERR
DORAL, FL 33178 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:** ADOLFO PASTRAN

01/09/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name PASTRAN, ADOLFO L
Address 11236 NW 77TH TERR
City-State-Zip: DORAL FL 33178

Title DIRECTOR
Name PASTRAN, ADOLFO L JR.
Address 11236 NW 77TH TERR
City-State-Zip: DORAL FL 33178

Title DIRECTOR
Name PASTRAN, ROSEMARY
Address 11236 NW 77TH TERR
City-State-Zip: DORAL FL 33178

Title DIRECTOR
Name PASTRAN, MONICA
Address 11236 NW 77TH TERR
City-State-Zip: DORAL FL 33178

Title DIRECTOR
Name PASTRAN, EMILY C
Address 11236 NW 77 TERRACE
City-State-Zip: MEDLEY FL 33178

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: ADOLFO PASTRAN**OWNER**

01/09/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date