2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000029693

Entity Name: LDC SOUTH FLORIDA VENTURES, LLC

Current Principal Place of Business:

550 BILTMORE WAY, SUITE 1110 CORAL GABLES, FL 33134

Current Mailing Address:

550 BILTMORE WAY, SUITE1110 CORAL GABLES, FL 33134

FEI Number: 20-1765389

Name and Address of Current Registered Agent:

SCHECHTER, ROSA EESQ. 550 BILTMORE WAY, SUITE1110 CORAL GABLES, FL 33134 US Apr 26, 2022 Secretary of State 8695859485CC

Date

FILED

Certificate of Status Desired: No

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

Authorized Person(s) Detail :

Title	P	Title	V
Name	STERN, RODOLFO	Name	STERN, EDUARDO
Address	550 BILTMORE WAY, SUITE 1110	Address	550 BILTMORE WAY, SUITE 1110
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134
	2	Tide	
Title	S	Title	V
Name	HORWITZ, ROBERTO	Name	SERVIANSKY, DAVID
Address	550 BILTMORE WAY, SUITE 1110	Address	550 BILTMORE WAY, SUITE 1110
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134
Title	D	Title	TREASURER
Title Name	D ECKSTEIN BERNARD	Title Name	TREASURER CEPERO, VIRGINIA
Name	ECKSTEIN, BERNARD		
Name Address	ECKSTEIN, BERNARD 550 BILTMORE WAY, SUITE 1110	Name Address	CEPERO, VIRGINIA 550 BILTMORE WAY, SUITE 1110
Name	ECKSTEIN, BERNARD 550 BILTMORE WAY, SUITE 1110	Name	CEPERO, VIRGINIA 550 BILTMORE WAY, SUITE 1110
Name Address	ECKSTEIN, BERNARD 550 BILTMORE WAY, SUITE 1110	Name Address	CEPERO, VIRGINIA 550 BILTMORE WAY, SUITE 1110
Name Address City-State-Zip:	ECKSTEIN, BERNARD 550 BILTMORE WAY, SUITE 1110 CORAL GABLES FL 33134	Name Address	CEPERO, VIRGINIA 550 BILTMORE WAY, SUITE 1110
Name Address City-State-Zip: Title	ECKSTEIN, BERNARD 550 BILTMORE WAY, SUITE 1110 CORAL GABLES FL 33134 VP	Name Address	CEPERO, VIRGINIA 550 BILTMORE WAY, SUITE 1110

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 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: RODOLFO STERN

PRESIDENT

04/26/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date