

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000126084

**Entity Name:** A & N ENTREPRENEURS, LLC

**Current Principal Place of Business:**

5050 BISCAYNE BOULEVARD  
UNIT 100 102  
MIAMI, FL 33137

**FILED**  
**Apr 21, 2023**  
**Secretary of State**  
**3283558415CC**

**Current Mailing Address:**

P.O. BOX 611780  
NORTH MIAMI , FL 33261 US

**FEI Number:** 98-1116910

**Certificate of Status Desired:** No

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

GARIBOTTO, DANIEL  
5050 BISCAYNE BOULEVARD  
UNIT 100 102  
MIAMI, FL 33137 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

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           GARIBOTTO, DANIEL  
Address        P.O BOX 611780  
City-State-Zip: NORTH MIAMI FL 33261

Title           MGRM  
Name           GDM HOLDINGS, LLC  
Address        P.O. BOX 611780  
City-State-Zip: NORTH MIAMI FL 33261

Title           MANAGER  
Name           GARIBOTTO, MARLI  
Address        P.O. BOX 611780  
City-State-Zip: NORTH MIAMI FL 33261

*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:** DANIEL GARIBOTTO

**MANAGER**

**04/21/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date