

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000075263

**Entity Name:** SANLORENZO OF THE AMERICAS, LLC

**Current Principal Place of Business:**

1515 SE 17TH STREET  
STE 125  
FT LAUDERDALE, FL 33316

**Current Mailing Address:**

1515 SE 17TH STREET  
STE 125  
FT LAUDERDALE, FL 33316 US

**FEI Number: 80-0236179**

**Certificate of Status Desired: No**

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

ROBERT ALLEN LAW, P.A.  
1441 BRICKELL AVENUE  
SUITE 1400  
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: ROBERT N. ALLEN, JR.**

**04/11/2024**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title DIRECTOR, CEO, MANAGER  
Name BERARDI, PIETRO  
Address 1515 SE 17TH STREET  
STE 125  
City-State-Zip: FT LAUDERDALE FL 33316

Title DIRECTOR, CHAIRMAN  
Name PEROTTI, MASSIMO  
Address 1515 SE 17TH STREET  
STE 125  
City-State-Zip: FT LAUDERDALE FL 33316

Title DIRECTOR, CFO, SECRETARY  
Name TITO, BARBARA  
Address 1515 SE 17TH STREET  
STE 125  
City-State-Zip: FT LAUDERDALE FL 33316

Title DIRECTOR  
Name VINCENZI, TOMMASO  
Address 1515 SE 17TH STREET  
STE 125  
City-State-Zip: FT LAUDERDALE FL 33316

Title DIRECTOR  
Name BRUZZESE, ATTILIO  
Address 1515 SE 17TH STREET  
STE 125  
City-State-Zip: FT LAUDERDALE FL 33316

Title DIRECTOR  
Name BISOGNI, DAVID  
Address 1515 SE 17TH STREET  
STE 125  
City-State-Zip: FT LAUDERDALE FL 33316

*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: BARBARA TITO**

**SECRETARY**

**04/11/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date