

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000069544

Entity Name: MALIBU DREAMS, LLC

Current Principal Place of Business:

15281 WILSHIRE CIR. S
PEMBROKE PINES, FL 33027

Current Mailing Address:

15281 WILSHIRE CIR. S
PEMBROKE PINES, FL 33027 US

FEI Number: 46-0522932

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOSE A. VILLAR CPA, P.A.
231 ALTARA AVENUE
CORAL GABLES, FL 33146 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 MGRM
Name CRESPO, FLAVIO A
Address 15281 WILSHIRE CIR. S
City-State-Zip: PEMBROKE PINES FL 33027

Title MANAGER
Name ALBERTO, CRESPO E
Address 15281 WILSHIRE CIR. S
City-State-Zip: PEMBROKE PINES FL 33027

Title AUTHORIZED REPRESENTATIVE
Name FERRO DE CRESPO, ANA MARIA
Address 15281 WILSHIRE CIR. S
City-State-Zip: PEMBROKE PINES FL 33027

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: FLAVIO CRESPO

MANAGER

04/05/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date