

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000015579

**Entity Name:** FAMILY ABUNDANCE LLC

**Current Principal Place of Business:**

338 COVERT AVE  
NEW HYDE PARK, NY 11040

**Current Mailing Address:**

50-07-108ST  
CORONA, NY 11368 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MARUCA, RITA  
274 CORAL TRACE LANE  
DELRAY, FL 33445 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 MGR  
Name MARUCA, RITA  
Address 338 COVERT AVE  
City-State-Zip: NEW HYDE PARK NY 11040

Title MGRM  
Name MARUCA, LUIGI  
Address 338 COVERT AVE  
City-State-Zip: NEW HYDE PARK NY 11040

Title MGRM  
Name HALOUDIS, CONNIE  
Address 338 COVERT AVE  
City-State-Zip: NEW HYDE PARK NY 11040

Title MGRM  
Name MARUCA, ITALO R  
Address 338 COVERT AVE  
City-State-Zip: NEW HYDE PARK NY 11040

Title MGRM  
Name MARUCA, ANTONIO F  
Address 338 COVERT AVE  
City-State-Zip: NEW HYDE PARK NY 11040

*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:** RITA MARUCA

**MANAGER**

**02/14/2019**

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

\_\_\_\_\_  
Date