

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000049456

**Entity Name:** FI 5044 LLC

**Current Principal Place of Business:**

JUAN DE LEYVA 115  
COL. LOMAS VIRREYES  
MEXICO, DISTRITO FEDERAL 11000

**Current Mailing Address:**

5044 FISHER ISLAND UNIT 5044  
5044  
MIAMI, FL 33109 US

**FEI Number:** 42-1771888

**Certificate of Status Desired:** No

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

AGI REGISTERED AGENTS INC  
1000 BRICKELL AVENUE  
SUITE 300  
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:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name DE TORRADO, GABRIELA G  
Address 5044 FISHER ISLAND UNIT 5044  
5044  
City-State-Zip: MIAMI FL 33109

Title DIRECTOR  
Name TORRADO, COSME  
Address 5044 FISHER ISLAND UNIT 5044  
5044  
City-State-Zip: MIAMI FL 33109

*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:** COSME TORRADO

**DIRECTOR**

**01/05/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date