

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000013823

**Entity Name:** JAZ OFFICES, LLC

**Current Principal Place of Business:**

4848 SW 72 AVE.  
MIAMI, FL 33155

**FILED**  
**Apr 29, 2019**  
**Secretary of State**  
**7491694475CC**

**Current Mailing Address:**

4848 SW 72 AVE  
MIAMI, FL 33155 US

**FEI Number:** 90-0791175

**Certificate of Status Desired:** No

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

ZACARIAS, JOSE A  
4848 SW 72 AVE  
MIAMI, FL 33155 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            PRESIDENT  
Name            ZACARIAS, JOSE A  
Address        4848 SW 72 AVE  
City-State-Zip: MIAMI FL 33155

Title            SECRETARY  
Name            ZACARIAS, SANDRA Y  
Address        34 MIRACLE MILE  
City-State-Zip: CORAL GABLES FL 33134

*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:** JOSE ZACARIAS

**MANAGER**

**04/29/2019**

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

\_\_\_\_\_  
Date