

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000020729

Entity Name: ROSALES CA LLC**Current Principal Place of Business:**690 LONE PINE LANE
WESTON, FL 33327**Current Mailing Address:**1830 S. OCEAN DR
1802
HALLANDALE BEACH, FL 33009 US**FEI Number:** 33-1223758**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROSALES, ARIEH
1830 S. OCEAN DR UNIT 1802
HALLANDALE BEACH, FL 33009 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:** ARIEH ROSALES

04/05/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR
Name	ROSALES, ARIEH
Address	690 LONE PINE LANE
City-State-Zip:	WESTON FL 33327

Title	MGR
Name	ROSALES, ABRAHAM
Address	690 LONE PINE LANE
City-State-Zip:	WESTON FL 33327

Title	MGR
Name	ROSALES, JOSY
Address	690 LONE PINE LANE
City-State-Zip:	WESTON FL 33327

Title	MGR
Name	ROSALES, MOISES
Address	690 LONE PINE LANE
City-State-Zip:	WESTON FL 33327

Title	MGR
Name	ROSALES, BENJAMIN
Address	690 LONE PINE LANE
City-State-Zip:	WESTON FL 33327

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: ARIEH ROSALES

MGR

04/05/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date