

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000029098

**Entity Name:** LOS 4 PANAS LLC

**Current Principal Place of Business:**

8725 NW 18TH TER STE 308  
DORAL, FL 33172

**Current Mailing Address:**

8725 NW 18TH TER STE 308  
DORAL, FL 33172 US

**FEI Number:** 46-2122570

**Certificate of Status Desired:** No

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

HERNANDEZ, SAIDIN MESQ  
8725 NW 18TH TER STE 308  
DORAL, FL 33172 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 GUERRA, OSWALDO  
Address 1051 CEDAR FALLS DR  
City-State-Zip: WESTON FL 33327  
  
Title MGR  
Name ONORATO, ANTONIO  
Address 8725 NW 18TH TER STE 308  
City-State-Zip: DORAL FL 33172

Title MGR  
Name ONORATO, AGUSTINO  
Address 8725 NW 18TH TER STE 308  
City-State-Zip: DORAL FL 33172  
  
Title MGR  
Name FERNANDEZ, JUAN J  
Address 8725 NW 18TH TER STE 308  
City-State-Zip: DORAL FL 33172

*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:** OSWALDO GUERRA

**MGR**

**03/03/2016**

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

\_\_\_\_\_  
Date