

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000085483

**Entity Name:** LKTAS, LLC

**Current Principal Place of Business:**

165 NW 96TH TERRACE UNIT 3304  
HOLLYWOOD, FL 33024

**Current Mailing Address:**

C/O OLGA TOBON  
1141 BARONSCOURT DR  
WESLEY CHAPEL, FL 33543 US

**FEI Number:** 46-2978925

**Certificate of Status Desired:** Yes

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

ARIAS TOVAR, ILEANA ESQ.  
ARIAS TOVAR & ASSOCIATES, PA.  
2250 NW 136TH AVENUE  
PEMBROKE PINES, FL 33028 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:** ILEANA ARIAS TOVAR, ESQ.

01/27/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name CUARTAS, LUIS G  
Address 165 NW 96TH TERRACE UNIT 3304  
City-State-Zip: HOLLYWOOD FL 33024

Title M  
Name FERNANDEZ, MARIA P  
Address 165 NW 96TH TERRACE UNIT 3304  
City-State-Zip: HOLLYWOOD FL 33024

Title M  
Name CUARTAS, CAMILO  
Address 165 NW 96TH TERRACE UNIT 3304  
City-State-Zip: HOLLYWOOD FL 33024

Title M  
Name CUARTAS, LAURA  
Address 165 NW 96TH TERRACE UNIT 3304  
City-State-Zip: HOLLYWOOD FL 33024

Title M  
Name CUARTAS, ISABELA  
Address 165 NW 96TH TERRACE UNIT 3304  
City-State-Zip: HOLLYWOOD FL 33024

*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:** LUIS G CUARTAS

MBR

01/27/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date