## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000152917

**Entity Name: EVAPORS LLC** 

**Current Principal Place of Business:** 

7341 WEST FLAGLER STREET MIAMI. FL 33144

**Current Mailing Address:** 

7341 WEST FLAGLER STREET MIAMI. FL 33144 US

FEI Number: 90-1037072 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CABADO, ESTHER M 7341 WEST FLAGLER STREET MIAMI, FL 33144 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: ESTHER M CABADO 03/14/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail:

**PRESIDENT** Title

Name CABADO, ESTHER M

Address 7341 WEST FLAGLER STREET

City-State-Zip: MIAMI FL 33144

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.

03/14/2019 SIGNATURE: ESTHER CABADO **PRESIDENT** 

**FILED** Mar 14, 2019

**Secretary of State** 

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