

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000133218

**Entity Name:** RADEA PROPERTY, LLC**Current Principal Place of Business:**16699 COLLINS AVENUE  
APT# 3104  
SUNNY ISLES, FL 33160**Current Mailing Address:**16699 COLLINS AVENUE  
APT# 3104  
SUNNY ISLES, FL 33160 US**FEI Number:** 47-1822005**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**EAGLE CORPORATE SERVICES LLC  
444 BRICKELL AVE.  
SUITE P-41  
MIAMI, FL 33131 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:** CESARINA LUGO

04/29/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                                   |
|-----------------|-----------------------------------|
| Title           | MGR                               |
| Name            | GRUSZKA, ALEJANDRO                |
| Address         | 16699 COLLINS AVENUE<br>APT# 3104 |
| City-State-Zip: | SUNNY ISLES FL 33160              |

|                 |                                   |
|-----------------|-----------------------------------|
| Title           | MGR                               |
| Name            | COHEN, ROBERTO                    |
| Address         | 16699 COLLINS AVENUE<br>APT# 3104 |
| City-State-Zip: | SUNNY ISLES FL 33160              |

|                 |                                   |
|-----------------|-----------------------------------|
| Title           | MGR                               |
| Name            | GRUSZKA, EITHAN                   |
| Address         | 16699 COLLINS AVENUE<br>APT# 3104 |
| City-State-Zip: | SUNNY ISLES FL 33160              |

*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:** ALEJANDRO GRUSZKA

MANAGER

04/29/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date