

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000074540

**Entity Name:** NEUCENTRO LLC

**Current Principal Place of Business:**

CENTRO  
151 SE 1ST STREET APT 3510  
MIAMI, FL 33131

**FILED**  
**Jun 13, 2019**  
**Secretary of State**  
**7060103519CC**

**Current Mailing Address:**

720 NE 62ND STREET  
IOS ON THE BAY APT#305  
MIAMI, FL 33138 US

**FEI Number: 81-3102386**

**Certificate of Status Desired: No**

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

ALCEGA UZCATEGUI, MARIA A  
720 NE 62ND STREET  
IOS ON THE BAY APT# 305  
MIAMI, FL 33138 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 ALCEGA UZCATEGUI, MARIA A  
Address 720 NE 62ND STREET  
IOS ON THE BAY APT#305  
City-State-Zip: MIAMI FL 33138

Title MGR  
Name DELGADO SOSA, RAUL  
Address 720 NE 62ND STREET  
IOS ON THE BAY APT#305  
City-State-Zip: MIAMI FL 33138

Title MANAGER  
Name DELGADO ALCEGA, NICOLAS  
Address 720 NE 62ND STREET  
IOS ON THE BAY APT#305  
City-State-Zip: MIAMI FL 33138

*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: RAUL DELGADO SOSA**

**MANAGER**

**06/13/2019**

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

\_\_\_\_\_  
Date