

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000001169

**Entity Name:** AB SPECIALTIES PLUS LLC

**Current Principal Place of Business:**

4030 SW 147TH AVE  
MIRAMAR, FL 33027

**Current Mailing Address:**

4030 SW 147TH AVE  
MIRAMAR, FL 33027

**FEI Number:** 81-4857751

**Certificate of Status Desired:** No

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

MARTINEZ, PAUL A  
200 S. BISCAYNE BLVD.  
2790  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title SECRETARY  
Name VALDES-BRITO, ANELY  
Address 4030 SW 147TH AVE  
City-State-Zip: MIRAMAR FL 33027

Title PRESIDENT  
Name VALDES-BRITO, JULIO JR.  
Address 4030 SW 147TH AVE  
City-State-Zip: MIRAMAR FL 33027

Title AMBR  
Name VALDES-BRITO, ANTHONY  
Address 4030 SW 147 AVE  
City-State-Zip: MIRAMAR FL 33027

*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:** JULIO VALDES-BRITO

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04/25/2021

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

\_\_\_\_\_  
Date