

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000171554

**Entity Name:** GO APPLIANCE CENTRAL, LLC

**Current Principal Place of Business:**

9904 E COLONIAL DR  
ORLANDO, FL 32817

**Current Mailing Address:**

10470 COCONUT GROVE LN  
ORLANDO, FL 32825 US

**FEI Number: 82-2478449**

**Certificate of Status Desired: No**

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

ORTEGA, ANACONDA D  
2200 N. FORSYTH RD.  
# I14  
ORLANDO, FL 32807 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            AMBR  
Name            ORTEGA, ANACONDA D  
Address        2200 N. FORSYTH RD. #I14  
City-State-Zip: ORLANDO FL 32807

Title            AMBR  
Name            GUERRO, LUIS E  
Address        2200 N. FORSYTH RD. #I14  
City-State-Zip: ORLANDO FL 32807

Title            MGR  
Name            ORTEGA, ANACONDA D  
Address        2200 N. FORSYTH RD. #I14  
City-State-Zip: ORLANDO FL 32807

Title            MGR  
Name            GUERRERO, LUIS E  
Address        2200 N. FORSYTH RD. #I14  
City-State-Zip: ORLANDO FL 32807

*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: ANACONDA ORTEGA**

**OWNER**

**04/29/2024**

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

\_\_\_\_\_  
Date