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. MANAGING MEMBER 01/05/2023 SIGNATURE: STEVEN BIGIO

Electronic Signature of Signing Authorized Person(s) Detail

Title	MANAGING MEMBER	Title	AUTHORIZED MEMBER
Name	BIGIO, STEVEN	Name	SZTEINBERG, ILAN
Address	20505 E COUNTRY CLUB DRIVE UNIT 1531	Address	20225 NE 34TH CT UNIT 1217
City-State-Zip:	AVENTURA FL 33180	City-State-Zip:	AVENTURA FL 33180

# 1

	Electronic Signature of Registered Agent				
Authorized Person(s) Detail :					
Title	MANAGING MEMBER	Title	AUTHORIZED MEMBER		
Name	BIGIO, STEVEN	Name	SZTEINBERG, ILAN		
Address	20505 E COUNTRY CLUB DRIVE UNIT 1531	Address	20225 NE 34TH CT UNIT 1217		

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.

AVENTURA, FL 33180 US

20505 E COUNTRY CLUB DRIVE

AVENTURA, FL 33180 US

**UNIT 1531** 

### FEI Number: 82-3850129

### Name and Address of Current Registered Agent:

UNIT 1531 AVENTURA, FL 33180

## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L1800000313

Entity Name: LATIN AMERICAN DISTRIBUTOR GROUP LLC

### **Current Principal Place of Business:**

20505 E COUNTRY CLUB DRIVE

### **Current Mailing Address:**

20505 E COUNTRY CLUB DRIVE

**BIGIO, STEVEN** 

SIGNATURE:

UNIT 1531

Date

### FILED Jan 05, 2023 Secretary of State 4013332187CC

Certificate of Status Desired: No

Date