

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000075128

**Entity Name:** 5900 NW 1ST AVE LLC

**Current Principal Place of Business:**

12799 NW 99 CT  
HIALEAH GARDENS, FL 33018

**Current Mailing Address:**

12799 NW 99 CT  
HIALEAH GARDENS, FL 33018

**FEI Number:** 82-4950777

**Certificate of Status Desired:** No

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

AZPEITIA, ZOE  
12799 NW 99 CT  
HIALEAH GARDENS, FL 33018 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 BARCENAS, CARLOS  
Address 12799 NW 99 CT  
City-State-Zip: HIALEAH GARDENS FL 33018

Title AMBR  
Name BARCENAS, ALAIN  
Address 12799 NW 99 CT  
City-State-Zip: HIALEAH GARDENS FL 33018

*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:** CARLOS BARCENAS

**PRESIDENT**

**01/17/2020**

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

\_\_\_\_\_  
Date