

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000111911

**Entity Name:** LOS PIBES LLC

**Current Principal Place of Business:**

11 TOLEDO CT  
# 3-39  
DAVIE, FL 33328

**Current Mailing Address:**

11 TOLEDO CT  
# 3-39  
DAVIE, FL 33328 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

RIAL, CESAR  
4030 SW 84 TERR  
DAVIE, FL 33328 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 MNG  
Name RIAL, CESAR A  
Address 4030 SW 84 TERR  
City-State-Zip: DAVIE FL 33328

Title AR  
Name RIAL, FERNANDO  
Address 4153 APT 3 ST GUTIERREZ  
City-State-Zip: GUAYMALLEN ME 5525

Title AR  
Name RIAL, PABLO  
Address 11920 SW 9 MANOR  
City-State-Zip: DAVIE FL 33325

Title AR  
Name RIAL, CRISTHIAN  
Address 100 NW 76TH AVENUE APT 109  
City-State-Zip: PLANTATION FL 33324

*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:** RIAL,CESAR A

MNG

03/26/2019

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

\_\_\_\_\_  
Date