

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000161796

Entity Name: BLOS N ROSES DOWNTOWN DORAL LLC**Current Principal Place of Business:**8550 NW 53RD STREET
B103
DORAL, FL 33166**Current Mailing Address:**1600 PONCE DE LEON BLVD
CORAL GABLES, FL 33134**FEI Number:** 82-5119330**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PERDOMO, JC
1600 PONCE DE LEON BLVD
CORAL GABLES, FL 33134 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 MGR
Name HERNANDEZ, DIANA
Address 1600 PONCE DE LEON BLVD
City-State-Zip: CORAL GABLES FL 33134Title MGR
Name HENAO, KARO
Address 4411 PINE TREE DRIVE
City-State-Zip: MIAMI BEACH FL 33140Title MGR
Name PERDOMO, JUAN CARLOS
Address 1600 PONCE DE LEON BLVD
City-State-Zip: CORAL GABLES FL 33134Title MGR
Name MARIN, YADDIEL
Address 4411 PINCE TREE DR
City-State-Zip: MIAMI BEACH FL 33140Title MGR
Name PERDOMO, FREDIS
Address 1600 PONCE DE LEON BLVD
City-State-Zip: CORAL GABLES FL 33134

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: KAROLYN HENAO

MGR

03/17/2020

Electronic Signature of Signing Authorized Person(s) Detail_____
Date