## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000217224

**Entity Name: LENTRECOTEUSA LLC** 

**Current Principal Place of Business:** 

18146 COLLINS AVENUE SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:** 

7901 4TH ST N, STE 300 ST. PETERSBURG, FL 33702 US

FEI Number: 83-1786534 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC. 7901 4TH ST N **STE 300** 

ST. PETERSBURG, FL 33702 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

**FILED** Feb 09, 2024

**Secretary of State** 

2709255404CC

Authorized Person(s) Detail:

Title **AMBR** Title AMBR

SZKOLNIK. RONALD SZKOLNIK. TATIANA Name Name Address 2001 NE 191ST DR Address 2001 NE 191ST DR

NORTH MIAMI BEACH FL 33179 City-State-Zip: City-State-Zip: NORTH MIAMI BEACH FL 33179

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.

**MANAGER** 

SIGNATURE: RONALD SZKOLNIK

Electronic Signature of Signing Authorized Person(s) Detail