

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000287567

**Entity Name:** 1157 NW 1 STREET, LLC.**Current Principal Place of Business:**3137 SW 145 CT  
MIAMI, FL 33175**Current Mailing Address:**3137 SW 145 CT  
MIAMI, FL 33175 US**FEI Number:** 90-1257623**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GARCIA, PAMELA M  
3137 SW 145 CT  
MIAMI, FL 33175 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            | GARCIA, PAMELA |
| Address         | 3137 SW 145 CT |
| City-State-Zip: | MIAMI FL 33175 |

|                 |                       |
|-----------------|-----------------------|
| Title           | MGR                   |
| Name            | GARCIA-LOPEZ, PEDRO J |
| Address         | 3137 SW 145 CT        |
| City-State-Zip: | MIAMI FL 33175        |

|                 |                      |
|-----------------|----------------------|
| Title           | MGR                  |
| Name            | LOPEZ-GARCIA, INGRID |
| Address         | 3137 SW 145 CT       |
| City-State-Zip: | MIAMI FL 33175       |

|                 |                 |
|-----------------|-----------------|
| Title           | MGR             |
| Name            | GARCIA, PEDRO M |
| Address         | 3137 SW 145 CT  |
| City-State-Zip: | MIAMI FL 33175  |

*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:** PAMELA GARCIA**REGISTERED AGENT****03/28/2021**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date