

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000057333

Entity Name: BIENES Y RAICES VILLARREAL LLC**Current Principal Place of Business:**8301 NW 41 ST
APT 409
DORAL, FL 33166**Current Mailing Address:**8301 NW 41 ST
APT 409
DORAL, FL 33166 US**FEI Number:** 30-1178617**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MORALES VILLARREAL , SANTIAGO
8301 NW 41 ST
APT 409
DORAL, FL 33166 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:** SANTIAGO MORALES VILLARREAL

01/11/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MEMBER
Name MORALES VILLARREAL , NATALIA LORENA
Address 8301 NW 41 ST
APT 409
City-State-Zip: DORAL FL 33166

Title MANAGER
Name VILLARREAL BARRERO, LILIANA DE JESUS
Address 8301 NW 41 ST
APT 409
City-State-Zip: DORAL FL 33166

Title MEMBER
Name MORALES MONTANA, GABRIEL ALBERTO
Address 8301 NW 41 ST
APT 409
City-State-Zip: DORAL FL 33166

Title MEMBER
Name MORALES VILLARREAL, DUBAN ANDRES
Address 8301 NW 41 ST
APT 409
City-State-Zip: DORAL FL 33166

Title MEMBER
Name MORALES VILLARREAL, SANTIAGO
Address 8301 NW 41 ST
APT 409
City-State-Zip: DORAL FL 33166

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: SANTIAGO MORALES VILLARREAL**REGISTERED AGENT**

01/11/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date