

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000107566

**Entity Name:** VAAL USA LLC

**Current Principal Place of Business:**

1904 MAST TERRACE  
APT 102  
KISSIMMEE, FL 34741

**Current Mailing Address:**

1904 MAST TERRACE  
APT 102  
KISSIMMEE, FL 34741 US

**FEI Number:** 83-4559959

**Certificate of Status Desired:** No

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

CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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:** KARINNA SALAZA

04/16/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                             |                 |                             |
|-----------------|-----------------------------|-----------------|-----------------------------|
| Title           | MGR                         | Title           | MGR                         |
| Name            | TAPIA, ALCIRA P             | Name            | TAPIA, MARTHA               |
| Address         | 175 SW 7TH ST<br>SUITE 1906 | Address         | 175 SW 7TH ST<br>SUITE 1906 |
| City-State-Zip: | MIAMI FL 33130              | City-State-Zip: | MIAMI FL 33130              |
|                 |                             |                 |                             |
| Title           | AMBR                        |                 |                             |
| Name            | RANGEL, CARLOS ALBERTO      |                 |                             |
| Address         | 175 SW 7TH ST<br>SUITE 1906 |                 |                             |
| City-State-Zip: | MIAMI FL 33130              |                 |                             |

*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:** TAPIA, ALCIRA P.

04/16/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date