

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000139038

**Entity Name:** 12739 FL AVE LLC**Current Principal Place of Business:**120 S. EDISON AVE.  
TAMPA, FL 33606**Current Mailing Address:**120 S. EDISON AVE.  
TAMPA, FL 33606 US**FEI Number:** 84-1955674**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MANSOUR, GHASSAN  
120 S. EDISON AVE.  
TAMPA, FL 33606 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	MANSOUR, GHASSAN
Address	120 S. EDISON AVE.
City-State-Zip:	TAMPA FL 33606

Title	MGR
Name	ALHAMDANI, FALAH
Address	P.O. BOX 280516
City-State-Zip:	TAMPA FL 33682

Title	MGR
Name	MANSOUR, AHMED
Address	4013 W SAN MIGUEL ST
City-State-Zip:	TAMPA FL 33629

Title	MGR
Name	CAMERON, KEVIN
Address	4805 W. LAUREL STREET
City-State-Zip:	TAMPA FL 33607

*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:** GHASSAN MANSOUR**PRESIDENT****01/31/2023**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date