

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000172795

**Entity Name:** ANIMAL TROPIKAL, LLC

**Current Principal Place of Business:**

1600 PONCE DE LEON BOULEVARD 11TH FLOOR  
SUITE 1106  
CORAL GABLES, FL 33134

**Current Mailing Address:**

1600 PONCE DE LEON BOULEVARD 11TH FLOOR  
SUITE 1106  
CORAL GABLES, FL 33134 US

**FEI Number:** 84-2426312

**Certificate of Status Desired:** No

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

PARIS CONSULTING GROUP, LLC  
6750 N ANDREWS AVE  
SUITE 200  
FT. LAUDERDALE, FL 33309 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:** FEDERICO DE GRAZIA

04/25/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MANAGER  
Name VEGAS ALVAREZ, JOSE  
Address 23 CEDAR CHASE PL  
City-State-Zip: THE WOODLANDS TX 77381  
  
Title MANAGER  
Name SIERRA, PAULINA  
Address CARRERA 2 CON CALLE 1  
RESIDENCIA VALLESOL APT1B  
City-State-Zip: BARQUISIMETO 3001

Title MANAGER  
Name ANEZ, JUAN C  
Address 1600 PONCE DE LEON BOULEVARD  
11TH FLOOR  
SUITE 1106  
City-State-Zip: CORAL GABLES FL 33134

*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:** JUAN C ANEZ

MGR

04/25/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date