

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000259339

**Entity Name:** HI-RISE CONSULTING LLC

**Current Principal Place of Business:**

650 WEST AVENUE  
2611  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

33550 SOUTH DIXIE HIGHWAY  
105  
FLORIDA CITY, FL 33034

**FEI Number:** 61-1951410

**Certificate of Status Desired:** No

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

MILANES, JACQUELINE  
650 WEST AVE  
2611  
MIAMI BEACH, FL 33139 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 MILANES, JACQUELINE  
Address 650 WEST AVENUE APT 2611  
City-State-Zip: MIAMI BEACH FL 33139

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:** JACQUELINE MILANES

**PRESIDENT**

**03/24/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date