

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000272517

**Entity Name:** AMAPA INVEST USA, LLC

**Current Principal Place of Business:**

2108 NE 123 ST  
NORTH MIAMI, FL 33181

**Current Mailing Address:**

2108 NE 123 ST  
NORTH MIAMI, FL 33181 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

AMADO, GASTON I  
2108 NE 123 ST  
NORTH MIAMI, FL 33181 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 AMBR  
Name AMADO, GASTON I  
Address 2108 NE 123 ST  
City-State-Zip: NORTH MIAMI FL 33181

Title MGR  
Name APA, LUIS  
Address 2108 NE 123 ST  
City-State-Zip: NORTH MIAMI FL 33181

Title MBR  
Name NOSEDA, JOSEFINA  
Address 2108 NE 123 ST  
City-State-Zip: NORTH MIAMI FL 33181

Title MBR  
Name AMADO NOSEDA, MANUELA  
Address 2108 NE 123 ST  
City-State-Zip: NORTH MIAMI FL 33181

Title MBR  
Name AMADO NOSEDA, CARMELA  
Address 2108 NE 123 ST  
City-State-Zip: NORTH MIAMI FL 33181

*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:** GASTON AMADO

AMBR

03/10/2021

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

\_\_\_\_\_  
Date