

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000299025

**Entity Name:** JVEG ENTERPRISE, LLC

**Current Principal Place of Business:**

1612 SLASH PINE PLACE  
OVIEDO, FL 32765

**Current Mailing Address:**

1612 SLASH PINE PLACE  
OVIEDO, FL 32765 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

JIMMY VEGA  
1612 SLASH PINE PLACE  
OVIEDO, FL 32765 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	Title	AUTHORIZED MEMBER
Name	VEGA, JIMMY	Name	VEGA, JESSICA
Address	1612 SLASH PINE PLACE	Address	1612 SLASH PINE PLACE
City-State-Zip:	OVIEDO FL 32765	City-State-Zip:	OVIEDO FL 32765

*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:** JIMMY VEGA

AMBR

03/13/2024

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

\_\_\_\_\_  
Date