

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000043178

**Entity Name:** POMA'S LA LLC

**Current Principal Place of Business:**

8952 NW 6 CT  
PLANTATION, FL 33324

**Current Mailing Address:**

4612 N HIATUS RD  
SUNRISE, FL 33351 UN

**FEI Number:** 84-4674902

**Certificate of Status Desired:** No

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

BUSINESS SERVICES & SUPPORT NETWORK CORP  
4612 N HIATUS RD  
SUNRISE, FL 33351 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	Title	MGR
Name	MATO SILVA, LOURDES	Name	PORTILLO, ALVARO
Address	8952 NW 6 CT	Address	8952 NW 6 CT
City-State-Zip:	PLANTATION FL 33324	City-State-Zip:	PLANTATION FL 33324

*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:** LOURDES MATO SILVA

MGR

03/01/2022

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

\_\_\_\_\_ Date