

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000102378

**Entity Name:** CAPOTE POOLS AND SPA LLC

**Current Principal Place of Business:**

14984 SW 179TH ST  
MIAMI, FL 33187

**Current Mailing Address:**

14984 SW 179TH ST  
MIAMI, FL 33187 US

**FEI Number:** 85-0801061

**Certificate of Status Desired:** No

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

FONT, SAMANTHA A  
14984 SW 179TH ST  
MIAMI, FL 33187 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:** SAMANTHA FONT

01/26/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name CAPOTE, JOSE E SR.  
Address 14984 SW 179TH ST  
City-State-Zip: MIAMI FL 33187

Title MANAGER  
Name CAPOTE, MONICA MARIA  
Address 14984 SW 179TH ST  
City-State-Zip: MIAMI FL 33187

Title AUTHORIZED MEMBER  
Name FONT, SAMANTHA ALLISSANDRA  
Address 14984 SW 179TH ST  
City-State-Zip: MIAMI FL 33187

Title AUTHORIZED MEMBER  
Name DELGADO, STEPHANIE YVETTE  
Address 14912 SW 139TH AVE  
City-State-Zip: MIAMI FL 33186

*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:** SAMANTHA A FONT

**AUTHORIZED MEMBER**

01/26/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date