

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000324934

Entity Name: CAFE AMERICANO COLLINS LLC**Current Principal Place of Business:**2121 PONCE DE LEON BLVD
SUITE 1050
CORAL GABLES, FL 33134**Current Mailing Address:**2121 PONCE DE LEON BLVD
SUITE 1050
CORAL GABLES, FL 33134 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CONSULTING SERVICES OF SOUTH FLORIDA INC
2121 PONCE DE LEON BLVD
SUITE 1050
CORAL GABLES, FL 33134 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	MGRM
Name	JACOBO RASSI, JOSE S
Address	2121 PONCE DE LEON BLVD., STE 1050
City-State-Zip:	CORAL GABLES FL 33134

Title	MGRM
Name	DIB BUFARAH, JAMIL
Address	2121 PONCE DE LEON BLVD., SUITE 1050
City-State-Zip:	CORAL GABLES FL 33134

Title	MGRM
Name	ARAOZ, EDUARDO
Address	2121 PONCE DE LEON BLVD., SUITE 1050
City-State-Zip:	CORAL GABLES FL 33134

Title	MGR
Name	HURTADO, HECTOR
Address	2121 PONCE DE LEON BLVD., SUITE 1050
City-State-Zip:	CORAL GABLES FL 33134

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: HURTADO , HECTOR

MGR

04/25/2022

Electronic Signature of Signing Authorized Person(s) Detail_____
Date