## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000362090

Entity Name: TARA ESMERALDA, LLC

**Current Principal Place of Business:** 

7717 NW 20TH LANE GAINESVILLE, FL 32605

**Current Mailing Address:** 

7717 NW 20TH LANE

GAINESVILLE, FL 32605 US

FEI Number: 87-0925256 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOUKHTARA, SAYED 7717 NW 20TH LANE GAINESVILLE, FL 32605 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

Name

Authorized Person(s) Detail:

Title MANAGER Title AMBR

VALVERDE 5, LLC Name MOUKHTARA, SAYED Name

7717 NW 20TH LANE Address Address 2100 SALZEDO STREET

STE #300

MSA SACO PROJ 3 LLC

GAINESVILLE FL 32605 City-State-Zip: City-State-Zip: CORAL GABLES FL 33134

Title **AMBR** 

Title **AMBR** TILAL 3 INVESTMENT CORP. Name

Address 2100 SALZEDO STREET 8345 NW 66TH STREET Address

STE #300

STE D5767 CORAL GABLES FL 33134 City-State-Zip: City-State-Zip: MIAMI FL 33009

Title **AMBR** 

Title **AMBR** EXCELSA US REAL ESTATE 1, LP Name

Name TARA PROJECT LLC 7200 WISCONSIN AVE, Address

Address 7717 NW 20TH LANE SUITE 500

City-State-Zip: GAINESVILLE FL 32605 BETHESDA MD 20814 City-State-Zip:

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: SAYED MOUKHTARA MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

02/21/2022 Date

**FILED** Feb 21, 2022

**Secretary of State** 

0324238332CC

Date