

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000028943

**Entity Name:** CARES 5 INVESTMENT LLC

**Current Principal Place of Business:**

10750 NW 66TH ST  
APT 107  
DORAL, FL 33178

**Current Mailing Address:**

10750 NW 66TH ST  
APT 107  
DORAL, FL 33178

**FEI Number:** 86-1902492

**Certificate of Status Desired:** No

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

CASTANO, DANIEL V  
10750 NW 66TH ST  
APT 107  
DORAL, FL 33178 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	AMBR
Name	CASTANO, DANIEL V	Name	VARGAS, GABRIELA B
Address	10750 NW 66TH ST APT 107	Address	10750 NW 66TH ST APT 107
City-State-Zip:	DORAL FL 33178	City-State-Zip:	DORAL FL 33178

*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:** DANIEL V CASTANO

**DIRECTOR**

**02/28/2022**

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

\_\_\_\_\_  
Date