

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000035227

**Entity Name:** CRAB FAMILY PRODUCTIONS LLC

**Current Principal Place of Business:**

4004 LAKE UNDERHILL ROAD  
BLDG 2 APT G  
ORLANDO, FL 32803

**Current Mailing Address:**

4004 LAKE UNDERHILL ROAD  
BLDG 2 APT G  
ORLANDO, FL 32803 US

**FEI Number:** 99-0609186

**Certificate of Status Desired:** Yes

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

CHIARELLI, VINCENT A JR  
4020 MAGUIRE BLVD  
APT. 2205  
ORLANDO, FL 32803 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  
Name CHIARELLI, VINCENT A JR  
Address 4004 LAKE UNDERHILL ROAD  
BLDG 2 APT G  
City-State-Zip: ORLANDO FL 32803

Title MGR  
Name ADARVE, LUCAS  
Address 14231 NW 22ND ST  
City-State-Zip: PEMBROKE PINES FL 33028

Title MGR  
Name MARICIC, ALEX R  
Address 3509 PINEHILL WAY  
City-State-Zip: ANTELOPE CA 95843

*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:** VINCENT A CHIARELLI

**MANAGING PARTNER**

**02/19/2024**

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

\_\_\_\_\_  
Date