

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000059999

**Entity Name:** CORPORACION OBRAMAT LLC**Current Principal Place of Business:**2170 GEORGIANNA STREET  
LARGO, FL 33774**Current Mailing Address:**2170 GEORGIANNA STREET  
LARGO, FL 33774 US**FEI Number:** 86-2136421**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CAPITAL & TRUST CONSULTING GROUP LLC  
237 S DIXIE HWY  
4TH FLOOR  
CORAL GABLES, FL 33133 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:** CRISTIAN E LEIROS

02/10/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                                                                                             |                 |                                                                                       |
|-----------------|---------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------------------------------------------|
| Title           | MGR                                                                                         | Title           | MGR                                                                                   |
| Name            | FUCHS LUSTGARTEN, BENJAMIN                                                                  | Name            | LUSTGARTEN ZRIHEN, SIMON                                                              |
| Address         | URBANIZACION MANZANARES CALLE<br>ESTE<br>ESTE RESIDENCIAS CIMARU TORRE<br>A PISO 15 AP 152A | Address         | URBANIZACION TERRAZAS DEL<br>AVILA CALLE 5<br>RESIDENCIAS LOS ALISIOS PISO 5<br>AP 2A |
| City-State-Zip: | CARACAS 1080                                                                                | City-State-Zip: | CARACAS 1070                                                                          |

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:** BENJAMIN FUCHS LUSTGARTEN**MANAGER**

02/10/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date