

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000152817

Entity Name: CAPE TOWN VENTURES, LLC

Current Principal Place of Business:

3871 CRAWFORD AVE
MIAMI, FL 33133

Current Mailing Address:

3871 CRAWFORD AVE
MIAMI, FL 33133

FEI Number: 88-0613794

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HEALE, GAVIN D
3871 CRAWFORD AVE
MIAMI, 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name HEALE, GAVIN D
Address 3871 CRAWFORD AVE
City-State-Zip: MIAMI FL 33133

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: GAVIN DEREK HEALE

MANAGER

02/07/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date