

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000186694

**Entity Name:** APOLO 21, LLC

**Current Principal Place of Business:**

7823 NW 105TH AVE  
DORAL, FL 33178

**Current Mailing Address:**

7823 NW 105TH AVE  
DORAL, FL 33178 US

**FEI Number:** 86-3652970

**Certificate of Status Desired:** No

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

LFM ACCOUNTING SOLUTIONS, LLC  
66 WEST FLAGLER STREET  
SUITE 900  
MIAMI, FL 33130 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	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
Name	MOUBAYED, LAURENT	Name	MOUBAYED, MOUNIR
Address	7823 NW 105TH AVE	Address	7823 NW 105TH AVE
City-State-Zip:	DORAL FL 33178	City-State-Zip:	DORAL FL 33178

Title AUTHORIZED MEMBER  
 Name MOUBAYED BANNA, SALIM  
 Address 7823 NW 105TH AVE  
 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:** LAURENT MOUBAYED

**AUTHORIZED MEMBER**

**04/27/2023**

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

\_\_\_\_\_  
Date