

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000189844

**Entity Name:** TRIBE CARIBE LLC

**Current Principal Place of Business:**

407 LINCOLN ROAD  
SUITE 4-G  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

407 LINCOLN ROAD  
SUITE 4-G  
MIAMI BEACH, FL 33139 US

**FEI Number:** 86-3658198

**Certificate of Status Desired:** No

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

CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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 LEVIN, ANDRES  
Address 1521 ALTON ROAD 460  
City-State-Zip: MIAMI BEACH FL 33139

Title MGR  
Name CORNELL, CHRIS  
Address 1521 ALTON ROAD 460  
City-State-Zip: MIAMI BEACH FL 33139

*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:** CHRIS CORNELL

MR

04/11/2023

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

\_\_\_\_\_  
Date