

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000200949

**Entity Name:** LUPEA16, LLC

**Current Principal Place of Business:**

5228 NW 103 AVE  
DORAL, FL 33178

**Current Mailing Address:**

PO BOX 669213  
DORAL, FL 33166 UN

**FEI Number:** 35-2714083

**Certificate of Status Desired:** No

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

ZAMORA, COLON  
8050 NW 8TH STREET  
MIAMI, FL 33126 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 AMBR  
Name AUZQUI, CARLOS D  
Address SARMIENTO Y TORQUINST SIN  
NUMERO PISO:2 DP  
City-State-Zip: BUENOS AIRES BS 00000

Title AMBR  
Name MOREIRA, CYNTIA N  
Address SARMIENTO Y TORQUINST SIN  
NUMERO PISO:2 DP  
City-State-Zip: BUENOS AIRES BS 00000

*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:** AUZQUI , CARLOS

AMBR

04/29/2024

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

\_\_\_\_\_  
Date