

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000246516

**Entity Name:** CIJA 12, LLC

**Current Principal Place of Business:**

2020 PONCE DE LEON BLVD  
SUITE 1205 B  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2020 PONCE DE LEON BLVD  
SUITE 1205 B  
CORAL GABLES, FL 33134

**FEI Number:** 87-1078302

**Certificate of Status Desired:** No

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

VINA, GEORGE F  
2020 PONCE DE LEON BLVD  
SUITE 1205 B  
CORAL GABLES, FL 33134 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 MORALES BRAVO, GUILLERMO A  
Address 2020 PONCE DE LEON BLVD SUITE 1205 B  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name MORALES, MARIA CRISTINA  
Address 2020 PONCE DE LEON BLVD SUITE 1205 B  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name MORALES, MARIA IGNACIA  
Address 2020 PONCE DE LEON BLVD SUITE 1205 B  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name MORALES, MARIA JOSEFINA  
Address 2020 PONCE DE LEON BLVD SUITE 1205 B  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name MORALES, MARIA DE LOS ANGELES  
Address 2020 PONCE DE LEON BLVD SUITE 1205 B  
City-State-Zip: CORAL GABLES FL 33134

*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:** GUILLERMO A MORALES BRAVO

MGR

01/25/2023

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

\_\_\_\_\_  
Date