

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000301357

**Entity Name:** KIDATORIUM LLC

**Current Principal Place of Business:**

1615 WEEPING WILLOW WAY  
HOLLYWOOD, FL 33019

**Current Mailing Address:**

1615 WEEPING WILLOW WAY  
HOLLYWOOD, FL 33019 US

**FEI Number:** 87-1505985

**Certificate of Status Desired:** No

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

CAICEDO, CHRISTIAN  
150 SE 2ND AVENUE  
SUITE 1005  
MIAMI, FL 33131 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	Title	MGR
Name	BRACHE, GEORGETTE	Name	GONZALEZ, MARIETTA
Address	2302 NE 2ND AVENUE	Address	1615 WEEPING WILLOW WAY
City-State-Zip:	MIAMI FL 33137	City-State-Zip:	HOLLYWOOD FL 33019
Title	MGR		
Name	FERRO, ABEL		
Address	1615 WEEPING WILLOW WAY		
City-State-Zip:	HOLLYWOOD FL 33019		

*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:** GEORGETTE BRACHE

**MANAGER**

**04/24/2023**

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

\_\_\_\_\_  
Date