

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000370463

**Entity Name:** UTOPIA BLINDS AND SHADES LLC

**Current Principal Place of Business:**

5709 NW 47TH AVE  
TAMARAC, FL 33319

**Current Mailing Address:**

5709 NW 47TH AVE  
TAMARAC, FL 33319 US

**FEI Number:** 87-2491225

**Certificate of Status Desired:** Yes

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

FUENTES, ANGELA  
5709 NW 47TH AVE  
TAMARAC, FL 33319 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 P  
Name FUENTES, ANGELA  
Address 5709 NW 47TH AVE  
City-State-Zip: TAMARAC FL 33319

Title VP  
Name OREJUELA HERNANDEZ, PATRICIA  
Address 8051 SUNRISE LAKES DR APT 310  
City-State-Zip: SUNRISE FL 33322

*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:** ANGELA FUENTES

P

01/22/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date