## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000416176 **Entity Name: MEXRIDE LLC** 

**Current Principal Place of Business:** 

15127 NW 7TH CT

PEMBROKE PINES. FL 33028

**Current Mailing Address:** 

15127 NW 7TH CT

PEMBROKE PINES. FL 33028 US

FEI Number: 87-2769200 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FUENTES, ARTURO R SR. 15127 NW 7TH CT

PEMBROKE PINES, FL 33028 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

**FILED** Feb 07, 2023

**Secretary of State** 

8479946742CC

Authorized Person(s) Detail:

Title **PSTD** Title BP D

VILARDELL WEISS, LUIS A SR. SUBERVI, DAVID SR. Name Name

CARR. FEDERAL KM.287 HACIENDA Address 401E 28TH STREET, SUITE 6 Address

**COLONIAL C20** 

City-State-Zip: PATERSON NJ 07514 City-State-Zip: PLAYA DEL CARMEN, Q. ROO QR

77712

Title BP D

Title MGR Name FUENTES, ARTURO R SR.

Name TORRES. LUIS E SR. Address 15127 NW 7TH CT

Address CRA 40 # 5A-68 APTO 1215 PEMBROKE PINES FL 33028 City-State-Zip:

BARRANQUILLA, ATLANTICO AT City-State-Zip:

08001-0

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.

**VP** 

Electronic Signature of Signing Authorized Person(s) Detail