

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000417359

**Entity Name:** ARAV FLORIDA LLC

**Current Principal Place of Business:**

1059 HAND AVE  
SARSOTA, FL 34232

**Current Mailing Address:**

58 BRUCE BEER DR  
BRAMPTON, ONTARIO L6V 2W9 CA

**FEI Number:** 35-2729597

**Certificate of Status Desired:** No

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

REGISTERED AGENTS INC.  
7901 4TH ST. N, STE. 300  
ST. PETERSBURG, FL 33702 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            MBR  
Name            LB ARORA INC.  
Address        1059 HAND AVE  
City-State-Zip: SARSOTA FL 34232

*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:** LALIT BHUSHAN

**DIRECTOR**

**03/15/2024**

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

\_\_\_\_\_  
Date