

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000167858

Entity Name: 1050 NW 45, LLC**Current Principal Place of Business:**1637 SE 1ST ST
POMPANO BEACH, FL 33060**Current Mailing Address:**1637 SE 1ST ST
POMPANO BEACH, FL 33060**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GOMES, RUBIA A
1637 SE 1ST ST
POMPANO BEACH, FL 33060 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	GOMES, RUBIA A
Address	1637 SE 1ST ST
City-State-Zip:	POMPANO BEACH FL 33060

Title	MGR
Name	PEREZ, VIRGINIA G
Address	1637 SE 1ST STREET
City-State-Zip:	POMPANO BEACH FL 33060

Title	MBR
Name	THE RUBIA A GOMES REVOCABLE LIVING TRUST
Address	1637 SE 1ST STREET
City-State-Zip:	POMPANO BEACH FL 33060

Title	MBR
Name	THE VIRGINIA G PEREZ REVOCABLE LIVING TRUST
Address	1637 SE 1ST STREET
City-State-Zip:	POMPANO BEACH FL 33060

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: RUBIA AUREA GOMES

MGR

03/03/2023

Electronic Signature of Signing Authorized Person(s) Detail_____
Date