

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000185886

**Entity Name:** PROSERVI LLC

**Current Principal Place of Business:**

2620 NW 39TH AVENUE  
MIAMI, FL 33142

**Current Mailing Address:**

2620 NW 39TH AVENUE  
MIAMI, FL 33142 US

**FEI Number:** 32-0688536

**Certificate of Status Desired:** No

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

SABA, ZAMIR J  
2620 NW 39TH AVENUE  
MIAMI, FL 33142 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           | AMBR                | Title           | AMBR                |
| Name            | SABA, ZAMIR J       | Name            | QUINTERO, NOREXIS C |
| Address         | 2620 NW 39TH AVENUE | Address         | 2620 NW 39TH AVENUE |
| City-State-Zip: | MIAMI FL 33142      | City-State-Zip: | MIAMI FL 33142      |
|                 |                     |                 |                     |
| Title           | AMBR                |                 |                     |
| Name            | SABA, MARIA J       |                 |                     |
| Address         | 7903 NW 105TH AVE   |                 |                     |
| City-State-Zip: | DORAL FL 33178      |                 |                     |

*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:** ZAMIR SABA

**MANAGER**

**02/25/2025**

Electronic Signature of Signing Authorized Person(s) Detail

Date