

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000244956

**Entity Name:** BETARAM LLC

**Current Principal Place of Business:**

236 LA PAZ DRIVE  
KISSIMMEE, FL 34743

**Current Mailing Address:**

236 LA PAZ DRIVE  
KISSIMMEE, FL 34743

**FEI Number: 88-2504041**

**Certificate of Status Desired: No**

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

BETANCOURT, JAIME  
236 LA PAZ DRIVE  
KISSIMMEE, FL 34743 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  
Name BETANCOURT, JAIME  
Address 236 LA PAZ DRIVE  
City-State-Zip: KISSIMMEE FL 34744

Title AMBR  
Name RAMOS, LILLIAN  
Address 236 LA PAZ DRIVE  
City-State-Zip: KISSIMMEE FL 34743

Title MGR  
Name RAMOS, GEORGE  
Address 236 LA PAZ DRIVE  
City-State-Zip: KISSIMMEE FL 34743

Title MGR  
Name RAMOS, AARON  
Address 236 LA PAZ DRIVE  
City-State-Zip: KISSIMMEE FL 34743

Title SECR  
Name RAMOS, AIMEE  
Address 236 LA PAZ DRIVE  
City-State-Zip: KISSIMMEE FL 34744

*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: JAIME BETANCOURT**

**OWNER**

**04/12/2023**

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

\_\_\_\_\_  
Date