

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000417258

Entity Name: VELAR MAXMAR LLC**Current Principal Place of Business:**1311 PALMWAY STREET
KISSIMMEE, FL 34744**Current Mailing Address:**1311 PALMWAY STREET
KISSIMMEE, FL 34744 US**FEI Number:** 92-0504509**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SOPHOS CONSULTING GROUP CORP
8333 NW 53RD ST
STE 450
MIAMI, FL 33166 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 ROJAS ESCOBAR, PAOLA A
Address 1311 PALM WAY STREET
City-State-Zip: KISSIMMEE FL 34744

Title AMBR
Name ROJAS CIFUENTES, LUIS A
Address 1311 PALM WAY STREET
City-State-Zip: KISSIMMEE FL 34744

Title AMBR
Name ESCOBAR CHAVES, VICTORIA
Address 1311 PALM WAY STREET
City-State-Zip: KISSIMMEE FL 34744

Title AMBR
Name VELAR GROUP HOLDING CORP
Address 1311 PALM WAY STREET
City-State-Zip: KISSIMMEE FL 34744

Title AMBR
Name ZAMBRANO, JAIRO HERNAN
Address 1311 PALM WAY ST
City-State-Zip: KISSIMMEE FL 34744

Title AMBR
Name GONZALEZ, DIANA CAROLINA
Address 1311 PALM WAY STREET
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: FABIAN BELTRAN**AGENT****02/29/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date