

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000422473

**Entity Name:** FENIKAS LLC

**Current Principal Place of Business:**

8234 NW 48 TERRACE  
DORAL, FL 33166

**Current Mailing Address:**

8234 NW 48 TERRACE  
DORAL, FL 33166

**FEI Number:** 61-2052061

**Certificate of Status Desired:** No

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

DOWNTOWN ACCOUNTING MIAMI  
255 W FLAGLER ST STE 101  
MIAMI, FL 33131 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 LUZ MIRIAM RAY MENDOZA  
Address 8234 NW 48 TERRACE  
City-State-Zip: DORAL FL 33166

Title AMBR  
Name LAURA MARIA DURAN REY  
Address 8234 NW 48 TERRACE  
City-State-Zip: DORAL FL 33166

Title AMBR  
Name JUAN PABLO DURAN REY  
Address 8234 NW 48 TERRACE  
City-State-Zip: DORAL FL 33166

*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:** JUAN PABLO DURAN REY

AMBR

04/23/2023

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

\_\_\_\_\_  
Date