

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000431109

**Entity Name:** BRAVO CATERING AND MORE LLC**Current Principal Place of Business:**3401 14TH ST. W  
BRADENTON, FL 34205**Current Mailing Address:**3401 14TH ST. W  
BRADENTON, FL 34205 UN**FEI Number:** 92-0997506**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ATTARI, KOUROSH  
5611 INSPIRATION TER  
BRADENTON, FL 34210 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           | MGRM                 |
| Name            | ATTARI, KOUROSH      |
| Address         | 5611 INSPIRATION TER |
| City-State-Zip: | BRADENTON FL 34210   |

|                 |                         |
|-----------------|-------------------------|
| Title           | MGR                     |
| Name            | SHOBEIRI, HABIBOLLAH    |
| Address         | 11523 SAVANNA LAKES DR. |
| City-State-Zip: | PARRISH FL 34219        |

|                 |                     |
|-----------------|---------------------|
| Title           | MGR                 |
| Name            | TSIKITAS, PHOTIOS   |
| Address         | 1405 WILLOW OAK CIR |
| City-State-Zip: | BRADENTON FL 34209  |

|                 |                    |
|-----------------|--------------------|
| Title           | MGR                |
| Name            | CONTRERAS, MARIA   |
| Address         | 4125 11TH ST. E    |
| City-State-Zip: | BRADENTON FL 34208 |

*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:** KOUROSH ATTARI

MGRM

03/31/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date