

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000522356

**Entity Name:** AMSA USA LLC

**Current Principal Place of Business:**

1825 PONCE DE LEON BLVD  
#656  
CORAL GABLES, FL 33134

**Current Mailing Address:**

75 VALENCIA AVE  
SUITE 703  
CORAL GABLES, FL 33134 US

**FEI Number:** 92-1364236

**Certificate of Status Desired:** No

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

MONAHAN - MIJARES CPA, PA  
1825 PONCE DE LEON BLVD  
#656  
CORAL GABLES, FL 33134 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:** MONAHAN- MIJARES CPA, PA

04/25/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name DE MAZARIEGOS, VERA L  
Address 1825 PONCE DE LEON BLVD, #656  
City-State-Zip: CORAL GABLES FL 33134

Title AMBR  
Name MAZARIEGOS, ANA L  
Address 1825 PONCE DE LEON BLVD  
#656  
City-State-Zip: CORAL GABLES FL 33134

Title AP  
Name MAZARIEGOS, ANA G  
Address 1825 PONCE DE LEON BLVD  
#656  
City-State-Zip: CORAL GABLES FL 33134

*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:** ANA L MAZARIEGOS

AMBR

04/25/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date