

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000528186

Entity Name: MOMBA CARE REGISTRY FLORIDA LLC

Current Principal Place of Business:

900 BROKEN SOUND PKWY NW STE 175
BOCA RATON, FL 33487

Current Mailing Address:

900 BROKEN SOUND PKWY NW STE 175
BOCA RATON, FL 33487 US

FEI Number: 92-1402377

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC.
115 NORTH CALHOUN STREET
SUITE 4
TALLAHASSEE, FL 32301 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 OWNER
Name AVTZON, ELIEZER
Address 900 BROKEN SOUND PKWY NW STE
 175
City-State-Zip: BOCA RATON FL 33487

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: ELIEZER AVTZON

OWNER

04/26/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date