

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000001775

Entity Name: HALF MOON EMPANADAS HOSPITALS LLC

Current Principal Place of Business:

5201 NE 5TH AVE
MIAMI, FL 33137

Current Mailing Address:

5201 NE 5TH AVE
MIAMI, FL 33137

FEI Number: 92-3168859

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GUZMAN, MARIA D PILAR
5201 NE 5TH AVE
MIAMI, FL 33137 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 CEO
Name GUZMAN, MARIA D PILAR
Address 5201 NE 5TH AVE
City-State-Zip: MIAMI FL 33137

Title P
Name ZAVALA, JUAN
Address 5201 NE 5TH AVE
City-State-Zip: MIAMI FL 33137

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: GUZMAN , MARIA D PILAR

CEO

04/26/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date