

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000300807

**Entity Name:** OLIVE MEDITERRANEAN CUISINE LLC

**Current Principal Place of Business:**

14005 NW 15TH DRIVE  
PEMBROKE PINES, FL 33028

**Current Mailing Address:**

14005 NW 15TH DRIVE  
PEMBROKE PINES, FL 33028 US

**FEI Number:** 93-2033313

**Certificate of Status Desired:** No

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

MYSOREWALA, IDRIS  
19420 NW 3RD COURT  
PEMBROKE PINES, FL 33026 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 MYSOREWALA, IDRIS  
Address 19420 NW 3RD COURT  
City-State-Zip: PEMBROKE PINES FL 33026

Title MGR  
Name STINFIL, GUSTAVE  
Address 6770 NW 109 COURT  
City-State-Zip: DORAL FL 33178

Title MGR  
Name RIVERS, BRENDA  
Address 3627 DOUGLAS ROAD  
City-State-Zip: COCONUT GROVE FL 33133

Title MGR  
Name IABAL, MOHAMMED  
Address 14005 NW 15TH DRIVE  
City-State-Zip: PEMBROKE PINES FL 33028

Title MGR  
Name LOURENCO SHIBER DINA CARLA CRISTO  
Address 17900 NW 19TH STREET  
City-State-Zip: PEMBROKE PINES FL 33029

*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:** MYSOREWALA , IDRIS

MGRM

04/23/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date