

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000318225

**Entity Name:** DOMINICANA MUSIC WEEK LLC

**Current Principal Place of Business:**

5767 NW 115TH CT  
APT 105  
DORAL, FL 33178

**Current Mailing Address:**

5767 NW 115TH CT  
APT 105  
DORAL, FL 33178 US

**FEI Number:** 93-2269424

**Certificate of Status Desired:** No

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

PINA, PORFIRIO  
5767 NW 115TH CT  
APT 105  
DORAL, FL 33178 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            AMBR  
Name            MONTANO, KEVIN  
Address        5767 NW 115TH CT  
                  APT 105  
City-State-Zip: DORAL FL 33178

Title            AMBR  
Name            PINA, PORFIRIO  
Address        5767 NW 115TH CT  
                  APT 105  
City-State-Zip: DORAL FL 33178

*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:** PORFIRIO PINA

**PRESIDENT**

**02/06/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date