

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000434964

**Entity Name:** 4430 NE 5TH AVE, LLC

**Current Principal Place of Business:**

1637 SE 1ST STREET  
POMPANO BEACH, FL 33060

**Current Mailing Address:**

1637 SE 1ST STREET  
POMPANO BEACH, FL 33060

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

GOMES, RUBIA A  
1637 SE 1ST STREET  
POMPANO BEACH, FL 33060 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 MGR  
Name GOMES, RUBIA A  
Address 1637 SE 1ST STREET  
City-State-Zip: POMPANO BEACH FL 33060

Title MGR  
Name PEREZ, VIRGINIA G  
Address 1637 SE 1ST STREET  
City-State-Zip: POMPANO BEACH FL 33060

Title MGR  
Name THE RUBIA A GOMES REVOCABLE  
LIVING TRUST  
Address 1637 SE 1ST STREET  
City-State-Zip: POMPANO BEACH FL 33060

Title MGR  
Name THE VIRGINIA G PEREZ  
REVOCABLELIVING TRUST  
Address 1637 SE 1ST STREET  
City-State-Zip: POMPANO BEACH FL 33060

*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:** RUBIA AUREA GOMES

MGR

02/04/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date