

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000468379

**Entity Name:** FEBAMAR FLORIDA, LLC

**Current Principal Place of Business:**

9110 NW 106 STREET  
MEDLEY, FL 33178

**Current Mailing Address:**

1290 WESTON RD  
SUITE 220  
WESTON, FL 33326 UN

**FEI Number:** 93-4094707

**Certificate of Status Desired:** No

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

JOSE MAURICIO BELLO PA  
1290 WESTON RD  
SUITE 220  
WESTON, FL 33326 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 DE REGIL ALFARO, CLAUDIA B  
Address 9110 NW 106 STREET  
City-State-Zip: MEDLEY FL 33178

Title MGR  
Name SCHOENWALD CRUZ, LUIS F  
Address 9110 NW 106 STREET  
City-State-Zip: MEDLEY FL 33178

Title MGR  
Name ECHEVERRIA, LUIS E  
Address 9110 NW 106 STREET  
City-State-Zip: MEDLEY 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:** CLAUDIA B. DE REGIL ALFARO

**MGR**

**04/30/2024**

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

\_\_\_\_\_  
Date