

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000542954

**Entity Name:** 2707 E 22ND AVE LLC

**Current Principal Place of Business:**

15001 LAKE MAURINE DR  
ODESSA, FL 33556

**Current Mailing Address:**

15001 LAKE MAURINE DR  
ODESSA, FL 33556 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

AQUINO, MIGUEL  
15001 LAKE MAURINE DR  
ODESSA, FL 33556 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	Title	MGR
Name	AQUINO, KIM	Name	AQUINO, MIGUEL
Address	15001 LAKE MAURINE DR	Address	15001 LAKE MAURINE DR
City-State-Zip:	ODESSA FL 33556	City-State-Zip:	ODESSA FL 33556

*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:** KIM AQUINO

**OWNER**

**04/22/2024**

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

\_\_\_\_\_  
Date