

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000017584

Entity Name: LA GRANJA FRANCHISING CORPORATION**Current Principal Place of Business:**3907 NW 49TH STREET
TAMARAC, FL 33309**Current Mailing Address:**3907 NW 49TH STREET
TAMARAC, FL 33309 US**FEI Number: 75-3007846****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BARTRA, CLAUDIA
3907 NW 49TH STREET
TAMARAC, FL 33309 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**Officer/Director Detail :**

| | |
|-----------------|---------------------|
| Title | VP |
| Name | BARTRA, RACSO |
| Address | 3907 NW 49TH STREET |
| City-State-Zip: | TAMARAC FL 33309 |

| | |
|-----------------|---------------------|
| Title | S |
| Name | BARTRA, GUSTAVO JR |
| Address | 3907 NW 49TH STREET |
| City-State-Zip: | TAMARAC FL 33309 |

| | |
|-----------------|---------------------|
| Title | CB |
| Name | BARTRA, GUSTAVO |
| Address | 3907 NW 49TH STREET |
| City-State-Zip: | TAMARAC FL 33309 |

| | |
|-----------------|---------------------|
| Title | P, PRESIDENT |
| Name | BARTRA, CLAUDIA |
| Address | 3907 NW 49TH STREET |
| City-State-Zip: | TAMARAC FL 33309 |

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GUSTAVO BARTRA**CB****04/24/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date