

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000089093

**Entity Name:** GABLES JUICE BAR & MUSCLE PIZZA, INC.

**Current Principal Place of Business:**

230 ALMEIRA AVE  
CORAL GABLES, FL 33134

**Current Mailing Address:**

230 ALMEIRA AVE  
CORAL GABLES, FL 33134 US

**FEI Number:** 65-0605169

**Certificate of Status Desired:** Yes

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

LOPEZ, BELKIS  
230 ALMEIRA AVE  
CORAL GABLES, FL 33134 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:** BELKIS LOPEZ

02/11/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name LOPEZ, FERNANDO  
Address 510 SW 39 AVE  
City-State-Zip: MIAMI FL 33134

Title D  
Name LOPEZ, BELKIS  
Address 510 SW 39TH AVE  
City-State-Zip: MIAMI FL 33134

Title DIRECTOR  
Name LOPEZ, MARCUS T  
Address 230 ALMEIRA AVE  
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR  
Name SUAREZ, MICHAEL J  
Address 230 ALMEIRA AVE  
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR  
Name LOPEZ, KATYA REBELLA  
Address 230 ALMEIRA AVE  
City-State-Zip: CORAL GABLES FL 33134

*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:** BELKIS LOPEZ

**PRESIDENT**

02/11/2025

Electronic Signature of Signing Officer/Director Detail

Date