

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000001050

**Entity Name:** NAZARI ASSOCIATES V, LLC

**Current Principal Place of Business:**

4651 SHERIDAN ST  
SUITE 302  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

4651 SHERIDAN ST  
SUITE 302  
HOLLYWOOD, FL 33021 US

**FEI Number:** 65-1035139

**Certificate of Status Desired:** No

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

SARAGOVIA, EFRAIM  
3500 N. 55TH AVE.  
HOLLYWOOD, FL 33021 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 MGMR  
Name FAMILIA DE SARAGOVIA LLC  
Address 3500 N 55 AVE  
City-State-Zip: HOLLYWOOD FL 33021

Title MBR  
Name ZARAGOVIA, ANGELO  
Address 21055 NE 37TH AVE APT 3007  
City-State-Zip: AVENTURA FL 33180

Title MBR  
Name ILANA PARTNERS, LTD  
Address 2010 NE 210 ST  
City-State-Zip: MIAMI FL 33179

Title MBR  
Name VOLOSIN, STELLA MARTHA  
Address 2450 KENSINGTON BLVD  
City-State-Zip: DAVIE FL 33325

Title AMBR  
Name ANDRES ZARAGOVIA, SEBASTIAN  
Address 1000 RIVER REACH DR #119  
City-State-Zip: FT LAUDERDALE FL 33315

*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:** EFRAIM SARAGOVIA

**MANAGING MEMBER**

**02/02/2021**

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

\_\_\_\_\_  
Date