

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000001122

**Entity Name:** 7765 NW 146 STREET, LLC

**Current Principal Place of Business:**

17240 SW 63 MANOR  
SW RANCHES, FL 33331

**Current Mailing Address:**

10620 GRIFFIN RD.  
SUITE 102  
COOPER CITY, FL 33328 US

**FEI Number:** 37-1473972

**Certificate of Status Desired:** No

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

DEL RISCO, CLARA ESQ.  
10620 GRIFFIN RD.  
SUITE 102  
COOPER CITY, FL 33328 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	M	Title	MANAGER
Name	DEL RISCO, CLARA	Name	CHAVES, OMAR
Address	10620 GRIFFIN RD. SUITE 102	Address	10620 GRIFFIN RD. SUITE 102
City-State-Zip:	COOPER CITY FL 33328	City-State-Zip:	COOPER CITY FL 33328

*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:** CLARA DEL RISCO

**MANAGER**

**01/26/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date