

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000004164

**Entity Name:** KRAP 1, LLC

**Current Principal Place of Business:**

7000 SW 62ND AVE  
SUITE 525  
SOUTH MIAMI, FL 33143-4721

**Current Mailing Address:**

7000 SW 62 AVE  
SUITE 525  
SOUTH MIAMI, FL 33143-4721 US

**FEI Number:** 34-1977408

**Certificate of Status Desired:** No

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

TEST, SANDRA LESQ.  
8900 SW 117 AVENUE, SUITE #B105  
MIAMI, FL 33186 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  
Name RABEN, KAREN  
Address 7000 SW 62ND AVE  
SUITE 525  
City-State-Zip: SOUTH MIAMI FL 33143-4721

*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:** KAREN RABEN MD

MGR

02/13/2023

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

\_\_\_\_\_ Date