## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000013360

Entity Name: MBCDC: VILLA MARIA, LLC

**Current Principal Place of Business:** 

935 PENNSYLVANIA AVE **UNIT 102** 

MIAMI BEACH, FL 33139

**Current Mailing Address:** 

935 PENNSYLVANIA AVE **UNIT 102** 

MIAMI BEACH, FL 33139 US

FEI Number: 20-2266916 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BENIQUEZ, ALEJANDRA KAUFMAN ROSSIN & CO 3310 MARY STREET SUITE 501 MIAMI, FL 33133 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: ALEJANDRA BENIQUEZ 04/04/2024

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title **AUTHORIZED REPRESENTATIVE** Title **TREASURER** 

Name C/O MIAMI BEACH CDC Name PEREIRA, RAYMOND

935 PENNSYLVANIA AVE 935 PENNSYLVANIA AVE Address Address 102 102

City-State-Zip: MIAMI BEACH FL 33139 City-State-Zip: MIAMI BEACH FL 33139

Title **CHAIRMAN** Title CHIEF OF OPERATIONS

Name HAMMON, MICHAEL Name ARANGO, CRISTIAN

Address 935 PENNSYLVANIA AVE Address 935 PENNSYLVANIA AVE

City-State-Zip: MIAMI BEACH FL 33139 City-State-Zip: MIAMI BEACH FL 33139

Title **SECRETARY** WISEHEART, WILL Name

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935 PENNSYLVANIA AVE, UNIT 102 Address

City-State-Zip: MIAMI BEACH FL 33139

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: CRISTIAN ARANGO

CHIEF OF OPERATIONS

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04/04/2024

**FILED** Apr 04, 2024

**Secretary of State** 

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