

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000072774

Entity Name: PENSIONES COLOMBIA INT, LLC**Current Principal Place of Business:**7676 NW 186TH ST
STE 214
MIAMI, FL 33015**Current Mailing Address:**7676 NW 186TH ST
STE 214
MIAMI, FL 33015 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MARTIN ACCOUNTING & TAX SERVICE, INC
7678 NW 186TH ST
MIAMI, FL 33015 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	AMBR
Name	DEL CHIARO, HECTOR
Address	CALLE 56 NO 45 - 80 STE 301
City-State-Zip:	BARRANQUILLA ATL 00000

Title	AMBR
Name	REYES , IVAN
Address	CALLE 56 NO 45 - 80 STE 301
City-State-Zip:	BARRANQUILLA ATL 00000

Title	AMBR
Name	BRODMEIER, RAFAEL
Address	CALLE 56 NO 45 - 80 STE 301
City-State-Zip:	BARRANQUILLA ATL 00000

Title	AMBR
Name	OROZCO, RODRIGO
Address	CALLE 56 NO 45 - 80 STE 301
City-State-Zip:	BARRANQUILLA ATL 00000

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: HECTOR DEL CHIARO

AMBR

04/06/2022

Electronic Signature of Signing Authorized Person(s) Detail_____
Date