

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000053193

**Entity Name:** ABA LEOPARD ENTERPRISES LLC

**Current Principal Place of Business:**

984 S.W. 1ST STREET  
MIAMI, FL 33130

**Current Mailing Address:**

P.O. BOX 143406  
CORAL GABLES, FL 33114

**FEI Number: 56-2659351**

**Certificate of Status Desired: No**

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

MCPHILLIPS LAW FIRM PA  
2525 PONCE DE LEON BLVD.  
300  
CORAL GABLES, FL 33134 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	Title	MGR
Name	PEREZ-CARRILLO, LISSETTE	Name	MCPHILLIPS, FRANK
Address	P.O. BOX 143406	Address	P.O. BOX 143406
City-State-Zip:	CORAL GABLES FL 33114	City-State-Zip:	CORAL GABLES FL 33114

*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: LISSETTE PEREZ-CARRILLO**

**MGR**

**04/13/2021**

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

\_\_\_\_\_  
Date