

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000082105

**Entity Name:** SUPERIOR FROZEN FRUITS DISTRIBUTOR, LLC

**Current Principal Place of Business:**

19700 SW 192ND STREET  
MIAMI, FL 33187

**Current Mailing Address:**

19700 SW 192ND STREET  
MIAMI, FL 33187

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

REYES, YVETTE B  
901 PONCE DE LEON BLVD  
SUITE 604  
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 MGRM  
Name REYES, RONNEY  
Address 19700 SW 192ND STREET  
City-State-Zip: MIAMI FL 33187

*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: RONNEY REYES** \_\_\_\_\_

**MANAGING MEMBER**

**04/25/2017**

Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date