

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000077850

**Entity Name:** INVERSIONES LOS CUATRO, LLC

**Current Principal Place of Business:**

350 S MIAMI AVE  
CU-A  
MIAMI, FL 33132

**FILED**  
**Mar 23, 2022**  
**Secretary of State**  
**8504823681CC**

**Current Mailing Address:**

350 S MIAMI AVE SUITE CU-A  
MIAMI, FL 33130 US

**FEI Number: 27-3492422**

**Certificate of Status Desired: No**

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

ANEZ, ALEJANDRO  
350 S MIAMI AVE SUITE CU-A  
MIAMI, FL 33130 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           MANAGER, AUTHORIZED MEMBER  
Name           ANEZ, ALEJANDRO  
Address        350 S MIAMI AVE SUITE CU-A  
City-State-Zip: MIAMI FL 33130

Title           AUTHORIZED REPRESENTATIVE  
Name           NAME, FUAD  
Address        350 S MIAMI AVE SUITE CU-A  
City-State-Zip: MIAMI FL 33130

Title           AUTHORIZED REPRESENTATIVE  
Name           ANEZ, ANTONIO  
Address        350 S MIAMI AVE SUITE CU-A  
City-State-Zip: MIAMI FL 33130

Title           AUTHORIZED REPRESENTATIVE  
Name           NAME, HERMES  
Address        350 S MIAMI AVE SUITE CU-A  
City-State-Zip: MIAMI FL 33130

*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: ALEJANDRO ANEZ**

**MNGR**

**03/23/2022**

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

\_\_\_\_\_  
Date