

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000053463

**Entity Name:** CASA CONDE & ASSOCIATES LLC

**Current Principal Place of Business:**

4301 NE 1ST TERRACE  
SUITE 3  
OAKLAND PARK, FL 33334

**Current Mailing Address:**

4301 NE 1ST TERRACE  
SUITE 3  
OAKLAND PARK, FL 33334 US

**FEI Number:** 45-2112883

**Certificate of Status Desired:** No

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

CONDE, CESAR A  
4301 NE 1ST TERRACE  
SUITE 3  
OAKLAND PARK, FL 33334 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
Name	CONDE, CESAR A
Address	4301 NE 1ST TERRACE SUITE 3
City-State-Zip:	OAKLAND PARK FL 33334
Title	S
Name	VELASQUEZ VASQUEZ, RICARDO JOSE
Address	4301 NE 1ST TERRACE SUITE 3
City-State-Zip:	OAKLAND PARK FL 33334

Title	MGR
Name	VELASQUEZ VASQUEZ, RICARDO JOSE
Address	4301 NE 1ST TERRACE SUITE 3
City-State-Zip:	OAKLAND PARK FL 33334
Title	T
Name	CONDO, CESAR A
Address	4301 NE 1ST TERRACE SUITE 3
City-State-Zip:	OAKLAND PARK FL 33334

*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:** VELASQUEZ VASQUEZ , RICARDO JOSE

**MANAGER**

**01/28/2021**

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

\_\_\_\_\_  
Date