

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000062918

**Entity Name:** OV 5 CORAL POLLO, LLC

**Current Principal Place of Business:**

C/O ORION INVEST & MGMT. LTD. CORP.  
200 SO BISCAYNE BLVD 7TH FLOOR  
MIAMI, FL 33131

**Current Mailing Address:**

C/O ORION INVEST & MGMT. LTD. CORP.  
200 SO BISCAYNE BLVD 7TH FLOOR  
MIAMI, FL 33131 US

**FEI Number:** 45-5256016

**Certificate of Status Desired:** No

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

ORION INVESTMENT AND MANAGEMENT LTD., CORP  
C/O ORION INVEST & MGMT. LTD. CORP.  
200 SO BISCAYNE BLVD 7TH FLOOR  
MIAMI, FL 33131 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            | AL-RASHID, IBRAHIM  | Name            | SANZ, JOSEPH A  |
| Address         | C/O ORION INVEST & MGMT. LTD. CORP.<br>200 SOUTH BISCAYNE BOULEVARD,7TH FLOOR | Address         | C/O ORION INVEST & MGMT. LTD. CORP.<br>200 SO BISCAYNE BLVD 7TH FLOOR |
| City-State-Zip: | MIAMI FL 33131  | City-State-Zip: | MIAMI FL 33131  |

*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:** SANZ , JOSEPH A

**MGR**

**02/21/2019**

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Electronic Signature of Signing Authorized Person(s) Detail Date