

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000096717

**Entity Name:** SOMI CENTER, LLC

**Current Principal Place of Business:**

11251 NW 20 STREET UNIT 115  
MIAMI, FL 33172

**Current Mailing Address:**

11251 NW 20 STREET UNIT 115  
MIAMI, FL 33172 US

**FEI Number:** 46-2119592

**Certificate of Status Desired:** No

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

BOORD, LEONARD  
7655 SW 54TH CT  
MIAMI, FL 33143 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  
Name           MORALES, INGRID C  
Address        11251 NW 20TH ST  
                  UNIT 115  
City-State-Zip: MIAMI FL 33172

Title           MANAGER  
Name           MORALES, SYLVIA CRISTINA  
Address        11251 NW 20TH ST  
                  UNIT 115  
City-State-Zip: MIAMI FL 33172

Title           MGR  
Name           BOORD, LEONARD  
Address        7655 SW 54 CT  
City-State-Zip: MIAMI FL 33143

*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:** INGRID C MORALES

**MANAGER**

**04/23/2020**

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

\_\_\_\_\_  
Date