

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000156266

**Entity Name:** CEBALLOS CEBALLOS BESTULICH & PADRON, LLC

**Current Principal Place of Business:**

890 SOUTH DIXIE HIGHWAY  
CORAL GABLES, FL 33146

**Current Mailing Address:**

890 SOUTH DIXIE HIGHWAY  
CORAL GABLES, FL 33146

**FEI Number:** 46-4061103

**Certificate of Status Desired:** No

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

CEBALLOS, HAYDEE CPA  
890 SOUTH DIXIE HIGHWAY  
CORAL GABLES, FL 33146 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 CEBALLOS VAZQUEZ, HAYDEE  
Address 7211 SW 100 STREET  
City-State-Zip: PINECREST FL 33156

Title MGR  
Name CEBALLOS, CINDY  
Address 6477 SW 13 STREET  
City-State-Zip: MIAMI FL 33144

Title MGR  
Name BESTULICH, STEPHANIE  
Address 7641 SW 89 COURT  
City-State-Zip: MIAMI FL 33173

Title MGR  
Name PADRON, KRISTEN C  
Address 890 S DIXIE HWY  
City-State-Zip: CORAL GABLES FL 33146

*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:** HAYDEE CEBALLOS VAZQUEZ

**MGR**

**04/23/2019**

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

\_\_\_\_\_  
Date