

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000087031

**Entity Name:** DR PRENEUR LLC

**Current Principal Place of Business:**

21743 SW CITRUS BLVD  
INDIANTOWN, FL 34956

**Current Mailing Address:**

21743 SW CITRUS BLVD  
INDIANTOWN, FL 34956 US

**FEI Number:** 47-4071579

**Certificate of Status Desired:** No

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

CARVAJAL, ADRIANA  
11463 SW HALTON ST  
PORT SAINT LUCIE, FL 34987 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 ROJAS, DAMARYS D  
Address 6743 NW 107 PL  
City-State-Zip: DORAL FL 33178

Title MGR  
Name RODRIGUEZ, RODGAM R  
Address 6743 NW 107TH PL  
City-State-Zip: DORAL FL 33178

*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:** RODGAM RODRIGUEZ

MGR

03/26/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date