

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000138554

Entity Name: CESAR VACATION HOMES, LLC**Current Principal Place of Business:**110 LAS FUENTES DR
KISSIMMEE, FL 34746**Current Mailing Address:**MALAQUIAS CONCIERGE SERVICES LLC
3200 AMACA CIRC HOUSE
ORLANDO, FL 32837 US**FEI Number:** 47-4780983**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MALAQUIAS CONCIERGE SERVICES LLC
3200 AMACA CIRCLE
HOUSE
ORLANDO, FL 32837 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:** ANGELA M CHANDLER

01/29/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	AUTHORIZED MEMBER
Name	BUNECKER, CESAR A
Address	CARE OF: JOHAN KRONER 9201 FOREST HILL AVE STONY POINT II BUILDING
City-State-Zip:	RICHMOND VA 23235-6865

Title	AUTHORIZED MEMBER
Name	BUNECKER, JULIANA A
Address	CARE OF: JOHAN KRONER 9201 FOREST HILL AVE STONY POINT II BUILDING
City-State-Zip:	RICHMOND VA 23235-6865

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: CESAR A BUNECKER

AUTHORIZED MEMBER

01/29/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date