

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000184067

**Entity Name:** SHIBU SCARIA LLC

**Current Principal Place of Business:**

6166 NW 80 TER  
PARKLAND, FL 33067

**Current Mailing Address:**

6166 NW 80 TER  
PARKLAND, FL 33067 US

**FEI Number:** 47-5478739

**Certificate of Status Desired:** No

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

SCARIA, SHIBU  
6166 NW 80 TER  
PARKLAND, FL 33067 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 SCARIA, SHIBU  
Address 5939 NW, 79TH WAY  
City-State-Zip: PARKLAND FL 33067

*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:** SHIBU SCARIA

**MANAGER**

**04/24/2024**

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

\_\_\_\_\_  
Date