

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000056160

**Entity Name:** E.G.G. PARTNERS LLC

**Current Principal Place of Business:**

6010 NW 99TH AVE  
SUITE # 100  
DORAL, FL 33178

**FILED**  
**Feb 04, 2021**  
**Secretary of State**  
**7304549972CC**

**Current Mailing Address:**

6010 NW 99TH AVE  
SUITE # 100  
DORAL, FL 33178 US

**FEI Number:** 81-1961806

**Certificate of Status Desired:** No

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

ESCOBAR, ENRIQUE  
6010 NW 99TH AVE  
SUITE # 100  
DORAL, FL 33178 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 ESCOBAR, ENRIQUE  
Address 10600 NW 37TH TERRACE  
City-State-Zip: DORAL FL 33178

Title MMGR  
Name ESCOBAR, CLARA S  
Address 10600 NW 37TH TERRACE  
City-State-Zip: DORAL FL 33178

Title MGRM  
Name ESCOBAR, SEGIO  
Address 10600 NW 37TH TERRACE  
City-State-Zip: DORAL FL 33178

Title MGRM  
Name MARIANA, GIL  
Address 10600 NW 37TH TERRACE  
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:** CLARA SUSANA ESCOBAR

**MGR**

**02/04/2021**

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

\_\_\_\_\_  
Date