

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000121369

**Entity Name:** BEKAM SERVICES, LLC

**Current Principal Place of Business:**

1419 DOGWOOD CT  
KISSIMMEE, FL 34744

**Current Mailing Address:**

1419 DOGWOOD CT  
KISSIMMEE, FL 34744 US

**FEI Number:** 81-3032358

**Certificate of Status Desired:** No

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

FAIL SAFE ACCOUNTING LLC  
20 S ROSE AVE  
SUITE 4  
KISSIMMEE, FL 34741 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:** FARAH CRUZ

03/26/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            MANAGER  
Name            PEREZ, MAYRA  
Address        1419 DOGWOOD CT  
City-State-Zip: KISSIMMEE FL 34744

Title            MANAGER  
Name            ARREAGA MORALES, ANTELMO  
Address        1419 DOGWOOD CT  
City-State-Zip: KISSIMMEE FL 34744

*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:** MAYRA PEREZ

MANAGER

03/26/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date