

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000125898

**Entity Name:** MZ SUPPLY LLC

**Current Principal Place of Business:**

9831 NW 58TH STREET  
SUITE 147  
DORAL, FL 33178

**Current Mailing Address:**

9831 NW 58TH STREET  
SUITE 147  
DORAL, FL 33178 US

**FEI Number:** 81-3178990

**Certificate of Status Desired:** No

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

TAXCARE DORAL  
1400 NW 107TH AVENUE  
430  
MIAMI, FL 33172 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 ZAMBRANO, MANUEL  
Address 11202 NW 71ST ST  
City-State-Zip: MIAMI FL 33172

*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:** MANUEL ZAMBRANO

MGR

04/27/2018

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

\_\_\_\_\_  
Date