

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000131181

Entity Name: DREAM CAP LLC

Current Principal Place of Business:

8400 NW 36TH ST
SUITE 450
DORAL, FL 33166

Current Mailing Address:

9740 NW 10TH TER
MIAMI, FL 33172 US

FEI Number: 81-3620792

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

POLICARD, GAETAN R
9740 NW 10TH TER
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 POLICARD, GAETAN R
Address 9740 NW 10TH TER
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: GAETAN POLICARD

MGR

03/15/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date