

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000189330

**Entity Name:** F.R FOCUS LLC

**Current Principal Place of Business:**

630 S STATE ROAD 7  
MARGATE, FL 33068

**Current Mailing Address:**

11587 W ATLANTIC BLVD  
38  
CORAL SPRINGS, FL 33071 US

**FEI Number:** 82-2593739

**Certificate of Status Desired:** Yes

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

FLOREAL, REMILORT  
11587 W ATLANTIC BLVD APT 38  
CORAL SPRINGS, FL 33071 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           MANAGER  
Name            REMILORT, FLOREAL  
Address         630 S STATE ROAD 7  
City-State-Zip: MARGATE FL 33068

Title            MANAGER  
Name            FLOREAL, WISENA D  
Address         7517 NW 25TH ST  
City-State-Zip: MARGATE FL 33063

*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:** REMILORT FLOREAL

**PRESIDENT**

**03/20/2024**

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

\_\_\_\_\_  
Date