

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000260055

**Entity Name:** OPTIMUS FITNESS LLC

**Current Principal Place of Business:**

7963 NW 2ND ST  
MIAMI, FL 33126

**Current Mailing Address:**

13220 SW 9TH LN  
MIAMI, FL 33184

**FEI Number: 82-3895394**

**Certificate of Status Desired: No**

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

SANCHEZ, JUAN C  
13220 SW 9TH LN  
MIAMI, FL 33184 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	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
Name	PALOMINO, HECTOR M	Name	SANCHEZ, JUAN C
Address	3800 SW 32ND CT	Address	13220 SW 9TH LN
City-State-Zip:	WEST PARK FL 33023	City-State-Zip:	MIAMI FL 33184

*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: JUAN C SANCHEZ**

**MEMBER**

**04/29/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date