## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000198633

Entity Name: FORTES FOOD LLC

## **Current Principal Place of Business:**

1401 NORTH RIVERSIDE DRIVE APT 1503

POMPANO BEACH, FL 33062

**Current Mailing Address:** 

1401 NORTH RIVERSIDE DRIVE APT 1503

POMPANO BEACH, FL 33062 US

FEI Number: 35-2671689 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNIVERSAL TAX AND INSURANCE CORP 440 SOUTH FEDERAL HWY SUITE 104 DEERFIELD BEACH, FL 33441 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: JULIANA DUARTE SANTOS 06/05/2025

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title AMBR Title AMBR

Name RIBEIRO, MARCELO Name FORTES RIBEIRO, ANTONIA VITORIA

Address 1401 NORTH RIVERSIDE DRIVE Address 1401 NORTH RIVERSIDE DRIVE

APT 1503 APT 1503

City-State-Zip: POMPANO BEACH FL 33062 City-State-Zip: POMPANO BEACH FL 33062

Title AMBR Title AMBR

Name FORTES RIBEIRO, GIOVANNA Name ROSA RIBEIRO FILHO, MARCELO

Address 1401 NORTH RIVERSIDE DRIVE Address 1401 NORTH RIVERSIDE DRIVE

APT 1503 APT 1503

City-State-Zip: POMPANO BEACH FL 33062 City-State-Zip: POMPANO BEACH FL 33062

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: MARCELO RIBEIRO AMBR 06/05/2025

FILED Jun 05, 2025

**Secretary of State** 

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