

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000212123

**Entity Name:** LA BELLE ROSE RESTAURANT LLC

**Current Principal Place of Business:**

16989 NE 19TH AVE  
NORTH MIAMI BEACH, FL 33162

**Current Mailing Address:**

16989 NE 19TH AVE  
NORTH MIAMI BEACH, FL 33162 UN

**FEI Number: 83-2587272**

**Certificate of Status Desired: Yes**

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

ALEXIS, MARIE ROSELAINÉ  
16989 NE 19TH AVE  
NORTH MIAMI BEACH, FL 33162 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: MARIE R. ALEXIS**

**04/20/2020**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MANAGER/AM	Title	VP
Name	ALEXIS, MARIE ROSELAINÉ	Name	JOACHIM, JUSTIN
Address	16989 NE 19TH AVE	Address	16989 NE 19TH AVE
City-State-Zip:	NORTH MIAMI BEACH FL 33162	City-State-Zip:	NORTH MIAMI FL 33162

*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: MARIE R. ALEXIS**

**MANAGER**

**04/20/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date