

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000214669

**Entity Name:** CABINET SOLUTIONS TB, LLC

**Current Principal Place of Business:**

9103 130 AVENUE NORTH  
LARGO, FL 33771

**Current Mailing Address:**

8954 111TH ST  
SEMINOLE, FL 33772 US

**FEI Number:** 84-2990132

**Certificate of Status Desired:** No

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

CHAMORRO, HUGO D  
8954 111TH ST  
SEMINOLE, FL 33772 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 CHAMORRO, HUGO D  
Address 8954 111TH ST  
City-State-Zip: SEMINOLE FL 33772

Title MGR  
Name VARGAS, AIDA L  
Address 8954 111TH ST  
City-State-Zip: SEMINOLE FL 33772

*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:** HUGO D CHAMORRO

03/12/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date