

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000248620

**Entity Name:** CARMEN CAPITAL LLC

**Current Principal Place of Business:**

2641 N FLAMINGO RD 2305N  
SUNRISE, FL 33323

**Current Mailing Address:**

PO BOX 452347  
SUNRISE, FL 33345 US

**FEI Number:** 84-3679691

**Certificate of Status Desired:** No

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

TELFORT, CARMEN L  
200 S ANDREWS AVE  
SUITE 504  
FORT LAUDERDALE, FL 33301 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            PRESIDENT, AMBR  
Name            TELFORT, CARMEN L  
Address        PO BOX 452347  
City-State-Zip: SUNRISE FL 33345

Title            AMBR  
Name            TELFORT, JASMYN THAIS  
Address        PO BOX 452347  
City-State-Zip: SUNRISE FL 33345

Title            AMBR  
Name            TELFORT, DESTINI ATHALIA  
Address        PO BOX 452347  
City-State-Zip: SUNRISE FL 33345

*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:** CARMEN TELFORT

**PRESIDENT**

**04/30/2024**

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

\_\_\_\_\_  
Date