

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000231336

**Entity Name:** JUAN DOMINGUEZ LLC

**Current Principal Place of Business:**

4519 24TH PL SW  
B  
NAPLES, FL 34116

**Current Mailing Address:**

4519 24TH PL SW  
B  
NAPLES, FL 34116 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

FREEDOM TAX SERVICE OF SOUTHWEST FLORIDA C  
12355 COLLIER BLVD  
STE H  
NAPLES, FL 34116 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:** OLGA RAMOS

02/09/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
Name	CARRILLO, MARIBEL	Name	DOMINGUEZ, JUAN J
Address	4519 24TH PL SW APT B	Address	4519 24TH PL SW APT B
City-State-Zip:	NAPLES FL 34116	City-State-Zip:	NAPLES FL 34116

*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 J DOMINGUEZ

AUTHORIZED MEMBER

02/09/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date