

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000259935

Entity Name: ZU FLAVOR LLC**Current Principal Place of Business:**10107 ANCORA CIR
1230
ORLANDO, FL 32821**Current Mailing Address:**10107 ANCORA CIR
1230
ORLANDO, FL 32821 US**FEI Number:** 85-3040246**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LUGO URGELLES, MARIA E
10107 ANCORA CIR
1230
ORLANDO, FL 32821 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	AREP
Name	LUGO URGELLES, MARIA E
Address	10107 ANCORA CIR APT 1230
City-State-Zip:	ORLANDO FL 32821

Title	MBR
Name	LUZARDO GONZALEZ, SIOLETTE C
Address	10107 ANCORA CIR APT 1230
City-State-Zip:	ORLANDO FL 32821

Title	MBR
Name	DIAZ HUERTA, FRANCISCO J
Address	10107 ANCORA CIR APT 1230
City-State-Zip:	ORLANDO FL 32821

Title	MBR
Name	SUAREZ MARTINEZ, KAUF A D
Address	3174 FELTRIM PL UNIT 101
City-State-Zip:	KISSIMMEE FL 34747

Title	MBR
Name	PINA DIAZ, ALBERTO J
Address	3174 FELTRIM PL UNIT 101
City-State-Zip:	KISSIMMEE FL 34747

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: MARIA E. LUGO URGELLES**MANAGER****03/19/2021**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date