

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000307583

**Entity Name:** LUIS CRESPO LLC

**Current Principal Place of Business:**

5900 SW 12 STREET  
WEST MIAMI, FL 33144

**Current Mailing Address:**

5900 SW 12 STREET  
WEST MIAMI, FL 33144 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MARTORELL'S OFFICE LLC  
14850 SW 26 ST  
SUITE 103  
MIAMI, FL 33185 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	AMBR	Title	AMBR
Name	CRESPO, LUIS	Name	CRESPO, MONICA
Address	5900 SW 12 STREET	Address	5900 SW 12 STREET
City-State-Zip:	WEST MIAMI FL 33144	City-State-Zip:	WEST MIAMI FL 33144

*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:** MONICA CRESPO

**VICE PRESIDENT**

**01/28/2022**

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

\_\_\_\_\_  
Date