

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000395593

**Entity Name:** B & R PRODUCTS, LLC

**Current Principal Place of Business:**

18721 S.W. 104 AVENUE  
MIAMI, FL 33157

**Current Mailing Address:**

18721 S.W. 104 AVENUE  
MIAMI, FL 33157 US

**FEI Number:** 59-1790499

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 MEMBER  
Name URDANETA FUENMAYOR, LUIS  
EMIRO  
Address 3470 NW 82 AVENUE  
SUITE 790  
City-State-Zip: MIAMI FL 33122

Title MEMBER  
Name URDANETA, RAYNER  
Address 3470 NW 82 AVENUE,  
SUITE 790  
City-State-Zip: MIAMI FL 33122

Title MEMBER, PRESIDENT  
Name CASTELLON, MARIA  
Address 18721 S.W. 104 AVENUE  
City-State-Zip: MIAMI FL 33157

Title SECRETARY  
Name WINIKOFF , BRANDEE LYNN  
Address 3470 NW 82 AVENUE  
SUITE 790  
City-State-Zip: MIAMI FL 33122

Title SECRETARY  
Name GRADY, KEVIN P.  
Address 3470 NW 82 AVENUE,  
SUITE 790  
City-State-Zip: MIAMI FL 33122

*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:** BRANDEE LYNN WINIKOFF

**AUTHORIZED  
REPRESENTATIVE**

**04/15/2024**

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

\_\_\_\_\_  
Date