

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000273940

**Entity Name:** CHAABAN CONSULTING LLC

**Current Principal Place of Business:**

2500 NW 79 AV  
SUITE 186  
DORAL, FL 33122

**Current Mailing Address:**

2500 NW 79 AV  
SUITE 186  
DORAL, FL 33122 US

**FEI Number:** 37-2005419

**Certificate of Status Desired:** No

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

CHAABAN, ABDUL  
2500 NW 79 AV  
SUITE 186  
DORAL, FL 33122 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	MGR	Title	MGR
Name	CHAABAN, ABDUL	Name	CHAABAN, SHADI
Address	2500 NW 79 AV SUITE 186	Address	2500 NW 79 AV SUITE 186
City-State-Zip:	DORAL FL 33122	City-State-Zip:	DORAL 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:** ABDUL CHAABAN

**MANAGER**

**04/26/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date