

**2023 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L21000309282

**FILED**  
**Aug 09, 2023**  
**Secretary of State**  
**2016898359CC**

**Entity Name:** UNIVERSAL DREAMS CREDIT & INVESTMENT LLC

**Current Principal Place of Business:**

1210 EAST OSCEOLA PARKWAY  
SUITE 301  
KISSIMMEE, FL 34744

**Current Mailing Address:**

88 HARNESS LN  
KISSIMMEE, FL 34743 US

**FEI Number:** 87-1560219

**Certificate of Status Desired:** No

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

ESMERALDA C ALVIRE  
1210 EAST OSCEOLA PARKWAY  
SUITE 301  
KISSIMMEE, FL 34744 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:** ESMERALDA C ALVIRE

08/09/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           ALVIRE, ESMERALDA C  
Address        1210 EAST OSCEOLA PARKWAY  
                  SUITE 301  
City-State-Zip: KISSIMMEE FL 34744

Title           MANAGER  
Name           ORTIZ, LOUIS A  
Address        1210 EAST OSCEOLA PARKWAY  
                  SUITE 301  
City-State-Zip: KISSIMMEE FL 34744

Title           MEMBER  
Name           APONTE, MARIA TERESA  
Address        1210 E OSCEOLA PARKWAY  
                  301  
City-State-Zip: KISSIMMEE FL 34744

*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:** ESMERALDA ALVIRE

MANAGER

08/09/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date