

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

DOCUMENT# L21000321014

**Entity Name:** LANAMZ LLC

**Current Principal Place of Business:**

10139 WEST OAKLAND PARK BLVD  
SUNRISE, FL 33351

**Current Mailing Address:**

10139 WEST OAKLAND PARK BLVD  
SUNSRISE, FL 33351 US

**FEI Number:** 87-1662029

**Certificate of Status Desired:** No

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

CARNICERO, ALEJANDRO G  
10139 WEST OAKLAND PARK BLVD  
SUNSRISE, FL 33351 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  
Name CARNICERO, ALEJANDRO  
Address 10139 WEST OAKLAND PARK BLVD  
City-State-Zip: SUNSRISE FL 33351

Title MGR  
Name ZANI, MARTA M  
Address 10139 WEST OAKLAND PARK BLVD  
City-State-Zip: SUNSRISE FL 33351

Title MANAGER  
Name CARNICERO, SANTIAGO A  
Address 10139 WEST OAKLAND PARK BLVD  
City-State-Zip: SUNSRISE FL 33351

*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:** ALEJANDRO CARNICERO

MGR

09/26/2023

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

\_\_\_\_\_  
Date