

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000362307

**Entity Name:** ALBAPRO LLC

**Current Principal Place of Business:**

1635 W 44TH PL 402  
HIALEAH, FL 33012

**Current Mailing Address:**

1635 W 44TH PL 402  
HIALEAH, FL 33012 UN

**FEI Number:** 87-2131074

**Certificate of Status Desired:** No

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

ALBA OLIVEROS, JORGE E  
1635 W 44TH PL 402  
HIALEAH, FL 33012 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 P  
Name ALBA OLIVEROS, JORGE E  
Address 1635 W 44TH PL 402  
City-State-Zip: HIALEAH FL 33012

*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:** JORGE E. ALBA OLIVEROS

MGR

04/09/2024

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

\_\_\_\_\_ Date