

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000412065

**Entity Name:** ALBETT LLC

**Current Principal Place of Business:**

5642 LINCOLN CIR EAST  
LAKE WORTH, FL 33463

**Current Mailing Address:**

5642 LINCOLN CIR EAST  
LAKE WORTH, FL 33463 US

**FEI Number:** 87-2615281

**Certificate of Status Desired:** Yes

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

TRASME, MARIE B MS  
5642 LINCOLN CIR EAST  
LAKE WORTH, FL 33463 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	TRASME, MARIE B MS	Name	ALBERT, ARCHANGE MR
Address	5642 LINCOLN CIR EAST	Address	5642 LINCOLN CIR EAST
City-State-Zip:	LAKE WORTH FL 33463	City-State-Zip:	LAKE WORTH FL 33463

*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:** MARIE BETTY TRASME

**MGR**

**03/19/2024**

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

\_\_\_\_\_  
Date