

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000077262

**Entity Name:** ANA JACOB STUDIO LLC

**Current Principal Place of Business:**

2950 TAMiami TRAIL N  
SUITE 5, STUDIO 19  
NAPLES, FL 34103

**Current Mailing Address:**

1400 ROSEMARY LANE  
APT 1  
NAPLES, FL 34103 US

**FEI Number:** 88-0930319

**Certificate of Status Desired:** Yes

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

JACOB, ANA  
1400 ROSEMARY LANE  
APT 1  
NAPLES, FL 34103 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            AMBR  
Name            JACOB, ANA  
Address        1400 ROSEMARY LANE, APT 1  
City-State-Zip: NAPLES FL 34103

*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:** ANA JACOB

AMBR

03/15/2024

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

\_\_\_\_\_  
Date