

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000134924

**Entity Name:** MAGIC ADVENTURE LLC

**Current Principal Place of Business:**

12701 S JOHN YOUNG PKWY  
SUITE 216  
ORLANDO, FL 32837

**Current Mailing Address:**

12701 S JOHN YOUNG PKWY  
SUITE 216  
ORLANDO, FL 32837 US

**FEI Number:** 88-1620695

**Certificate of Status Desired:** No

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

TAX CARE ORLANDO  
12701 S JOHN YOUNG PKWY  
SUITE 216  
ORLANDO, FL 32837 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 MGRM  
Name ESPINOSA REBOA, LILIANA  
Address VICTOR MAURTUA 475 DPTO. 301  
SAN ISIDRO  
City-State-Zip: LIMA LI 15073

Title MGRM  
Name OCAMPO, ENRIQUE A  
Address VICTOR MAURTUA 475 DPTO.  
301 SAN ISIDRO  
City-State-Zip: LIMA 15073

*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:** OCAMPO , ENRIQUE A

**MGRM**

**04/27/2024**

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

\_\_\_\_\_  
Date