

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000249425

**Entity Name:** EBRO RIVER LLC

**Current Principal Place of Business:**

3850 GALT OCEAN DR  
APT 111  
FORT LAUDERDALE, FL 33308

**Current Mailing Address:**

3850 GALT OCEAN DR  
APT 111  
FORT LAUDERDALE, FL 33308 US

**FEI Number:** 88-2739010

**Certificate of Status Desired:** No

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

GG CONSULTING SERVICES CORP  
95 MERRICK WAY, THIRD FLOOR  
SUITE 300  
CORAL GABLES, FL 33134 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 CABEZON, MANUEL F  
Address 3850 GALT OCEAN DR. APT 111  
City-State-Zip: FORT LAUDERDALE FL 33308

Title MGR  
Name BORRAS, BEATRIZ E  
Address 3850 GALT OCEAN DR. APT 111  
City-State-Zip: FORT LAUDERDALE FL 33308

Title MGR  
Name CABEZON, FEDERICO  
Address 3850 GALT OCEAN DR  
City-State-Zip: FORT LAUDERDALE FL 33308

Title MGR  
Name CABEZON, JOSE MANUEL  
Address 3850 GALT OCEAN DR  
City-State-Zip: FORT LAUDERDALE FL 33308

*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:** CABEZON , MANUEL F

**MGR**

**04/25/2024**

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

\_\_\_\_\_  
Date