

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000331311

**Entity Name:** GHEORGHE SERVICES, PROFESSIONAL LIMITED LIABILITY COMPANY

**FILED**  
**Feb 09, 2023**  
**Secretary of State**  
**0822025777CC**

**Current Principal Place of Business:**

397 CITRUS RIDGE DR  
PONTE VEDRA, FL 32081

**Current Mailing Address:**

397 CITRUS RIDGE DR  
PONTE VEDRA, FL 32081 US

**FEI Number: APPLIED FOR**

**Certificate of Status Desired: No**

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

UNITED STATES CORPORATION AGENTS, INC.  
UNITED STATES CORPORATION AGENTS, INC.  
476 RIVERSIDE AVE.  
JACKSONVILLE, FL 32202 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 GHEORGHE, RADU  
Address 397 CITRUS RIDGE DR  
City-State-Zip: PONTE VEDRA FL 32081

*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: RADU GHEORGHE**

**AMBR**

**02/09/2023**

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

\_\_\_\_\_  
Date