

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000346383

**Entity Name:** PENINSULA OAKS LLC

**Current Principal Place of Business:**

14650 GATORLAND DR  
ORLANDO, FL 32837

**Current Mailing Address:**

2866 CLUB CORTILE CIR A  
KISSIMMEE, FL 34746 US

**FEI Number:** 88-3629486

**Certificate of Status Desired:** No

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

RAZU, ABRAHAM  
14650 GATORLAND DR  
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 RAZU DAJER, JORGE E  
Address 2866 CLUB CORTILE CIR A  
City-State-Zip: KISSIMMEE FL 34746

Title MGRM  
Name RAZU DAJER, ABRAHAM  
Address 2866 CLUB CORTILE CIR A  
City-State-Zip: KISSIMMEE FL 34746

Title MGRM  
Name SANORES BARQUIN, FELIX J  
Address 5802 B BULLOCK LOOP BUILDING C1  
18114  
City-State-Zip: LAREDO TX 78041

Title MGRM  
Name AVILA DIAZ, ROBERTO  
Address 5802 B BULLOCK LOOP BUILDING C1  
18114  
City-State-Zip: LAREDO TX 78041

*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:** ABRAHAM RAZU DAJER

**MANAGER**

**03/21/2025**

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

\_\_\_\_\_  
Date