

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000383828

**Entity Name:** PARTYLAND MIAMI LLC**Current Principal Place of Business:**12850 WEST STATE ROAD 84  
# 27 HOLLY LN  
DAVIE, FL 33325**Current Mailing Address:**12850 W STATE ROAD 84  
LOT 13-3  
DAVIE, FL 33325 US**FEI Number:** 93-4288020**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SANTANA, TABATHA L MRS  
12850 W STATE ROAD 84  
LOT 13-3  
DAVIE, FL 33325 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	SANTANA, TABATHA LOREDANA MRS
Address	12850 W STATE ROAD 84 LOT 13-3
City-State-Zip:	DAVIE FL 33325

Title	PRESIDENT
Name	SANTANA GALAVIS, TABATHA LOREDANA
Address	12850 W STATE ROAD 84 LOT 13-3
City-State-Zip:	DAVIE FL 33325

Title	AUTHORIZED REPRESENTATIVE
Name	BRICENO SANTANA, LUIS ALBERTO JR.
Address	12850 W STATE ROAD 84 LOT 13-3
City-State-Zip:	DAVIE FL 33325

Title	SOLE OWNER
Name	SANTANA GALAVIS, TABATHA LOREDANA
Address	12850 W STATE ROAD 84, LOT 13-3
City-State-Zip:	DAVIE FL 33325

Title	AUTHORIZED REPRESENTATIVE
Name	PRIETO, KEISLA MISLAY
Address	2770 WEST 62 ND, PL, 204
City-State-Zip:	HIALEAH FL 33016

*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:** TABATHA SANTANA

SOLE OWNER

04/29/2024

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