

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000078025

**Entity Name:** WILSHIRE MONTANA PARTNERS LLC

**Current Principal Place of Business:**

710 W 27TH ST  
HIALEAH, FL 33010

**Current Mailing Address:**

710 W 27TH ST  
HIALEAH, FL 33010 US

**FEI Number:** 87-3694169

**Certificate of Status Desired:** No

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

EZALDEIN, HARIB  
710 W 27TH ST  
HIALEAH, FL 33010 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 EZALDEIN, HARIB  
Address 2900 N.E. 2ND AVE  
City-State-Zip: MIAMI FL 33137

*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:** HARIB EZALDEIN

**MANAGER**

**02/11/2024**

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

\_\_\_\_\_  
Date