

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000111400

**Entity Name:** LALA GARASA LLC

**Current Principal Place of Business:**

1600 SW 1ST AVE  
606  
MIAMI, FL 33129

**Current Mailing Address:**

1600 SW 1ST AVE  
606  
MIAMI, FL 33129 US

**FEI Number:** 92-3251652

**Certificate of Status Desired:** No

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

ZERPA, MONICA  
1600 SW 1ST AVE  
UNIT 606  
MIAMI, FL 33129 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 AP  
Name SANTAROMITA, ASTRID  
Address CALLE DE GOYA 38, APT 2A  
City-State-Zip: MADRID CM 28001  
  
Title AMBR  
Name RIOS, ANTONIO  
Address AV. LOS SAMANES, RESIDENCIA  
AKARANTAY  
APT 9A  
City-State-Zip: LA FLORIDA, CARACAS 1050

Title AMBR  
Name ACOSTA, GLORIA  
Address AV. LOS SAMANES, RESIDENCIA  
AKARANTAY  
APT 9A  
City-State-Zip: LA FLORIDA, CARACAS 1050

*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:** ASTRID SANTAROMITA

AP

01/02/2025

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

\_\_\_\_\_  
Date