

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000209861

**Entity Name:** ANTONIO WORKER SERVICE LLC

**Current Principal Place of Business:**

219 NW 12TH AVE APT 708  
MIAMI, FL 33128

**Current Mailing Address:**

219 NW 12TH AVE APT 708  
MIAMI, FL 33128 US

**FEI Number:** 61-2087010

**Certificate of Status Desired:** No

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

MEZA GARCIA, CARLOS ANTONIO  
219 NW 12TH AVE APT 708  
MIAMI, FL 33128 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            MEZA GARCIA, CARLOS ANTONIO  
Address        219 NW 12TH AVE APT 708  
City-State-Zip: MIAMI FL 33128

*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:** CARLOS ANTONIO MEZA GARCIA

AMBR

07/23/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date