

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000222115

**Entity Name:** VISTA HAVEN, LLC

**Current Principal Place of Business:**

2525 PONCE DE LEON BLVD  
STE 800  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2525 PONCE DE LEON BLVD  
STE 800  
CORAL GABLES, FL 33134

**FEI Number:** 92-3906819

**Certificate of Status Desired:** No

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

URBINA CPA, PA  
354 SEVILLA AVE  
MIAMI, FL 33134 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	MBR	Title	MGR
Name	CUSCO, CARLOS E	Name	CUSCO, ADRIANA
Address	2525 PONCE DE LEON BLVD, STE 800	Address	2525 PONCE DE LEON BLVD STE 800
City-State-Zip:	CORAL FL 33134	City-State-Zip:	CORAL GABLES FL 33134

*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 CUSCO

**PRESIDENT**

**02/15/2024**

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

\_\_\_\_\_  
Date