

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000277916

**Entity Name:** MULTISERVICES HC LLC

**Current Principal Place of Business:**

7080 NW 179TH ST  
105  
HIALEAH, FL 33015

**Current Mailing Address:**

7080 NW 179TH ST  
105  
HIALEAH, FL 33015 US

**FEI Number:** 93-1840105

**Certificate of Status Desired:** No

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

COLMENARES, HECTOR  
7080 NW 179TH ST  
105  
HIALEAH, FL 33015 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            COLMENARES, HECTOR  
Address        7080 NW 179TH ST  
                  105  
City-State-Zip: HIALEAH FL 33015

*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:** HECTOR COLMENARES

HECTOR COLMENARES

04/29/2025

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

\_\_\_\_\_  
Date