

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000443233

**Entity Name:** VECABI LLC

**Current Principal Place of Business:**

5889 W 13TH AVE  
HIALEAH, FL 33012

**Current Mailing Address:**

5889 W 13TH AVE  
HIALEAH, FL 33012 US

**FEI Number:** 93-3619490

**Certificate of Status Desired:** No

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

ALONSO, MERCEDES  
13895 SW 42 TERR  
MIAMI, FL 33175 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 ESCOBAR ECHAVARRIA, PAUL  
ANDRES  
Address 5998 W 12TH AVE  
City-State-Zip: HIALEAH FL 33015

Title AMBR  
Name SOPO ABDULRAHIM, FAIRUZ  
Address 5998 W 12TH AVE  
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:** ESCOBAR ECHAVARRIA , PAUL ANDRES

AMBR

05/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date