## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000471528

**Entity Name: SAR ESTATES LLC** 

**Current Principal Place of Business:** 

16405 US HWY 19 N

CLEARWATER, FL 33764

**Current Mailing Address:** 

6105 MAIN STREET

NEW PORT RICHEY. FL 34653

FEI Number: 93-3928988 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE FAULKNER FIRM, P.A. 4056 TAMPA ROAD OLDSMAR, FL 34677 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.

Title

MGR

SIGNATURE:

Electronic Signature of Registered Agent

Date

**FILED** Apr 30, 2025

**Secretary of State** 

3858447406CC

Authorized Person(s) Detail:

Title MGR

Name SHAH, PURVI Name AMIN, MUKESHBHAI M

14316 BEAUTY CIRCLE Address 6508 49TH COURT E Address

City-State-Zip: ELLENTON FL 34222 HUDSON FL 34667 City-State-Zip:

Title MGR

PETAL, SWETA Name

Address 16512 5TH AVENUE E

City-State-Zip: **BRADENTON FL 34212** 

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: PETAL, SWETA Electronic Signature of Signing Authorized Person(s) Detail **MGR** 

04/30/2025