

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000489184

**Entity Name:** AGCASABLANCA LLC

**Current Principal Place of Business:**

420 JACKSON AVE  
LEHIGH ACRES, FL 33050

**Current Mailing Address:**

420 JACKSON AVE  
LEHIGH ACRES, FL 33050 US

**FEI Number:** 32-0752337

**Certificate of Status Desired:** No

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

ZAMORA TRIVINO, DENISSE  
819 BLUE RIDGE CIR.  
WEST PALM BEACH, FL 33409 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 GONZALEZ LOPEZ, ADRIANA  
Address 2192 SE FLORESTA DR  
City-State-Zip: PORT ST LUCIE FL 34984

Title AMBR  
Name GOICOCHEA GUTIERREZ, SEGUNDO  
A  
Address 2192 SE FLORESTA DR  
City-State-Zip: PORT ST LUCIE FL 34984

*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:** GONZALEZ LOPEZ , ADRIANA

AMBR

03/27/2024

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

\_\_\_\_\_ Date