### 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000496562

**Entity Name: JUBARTE LLC** 

**FILED** May 01, 2024 **Secretary of State** 7022018415CC

## **Current Principal Place of Business:**

2295 S HIAWASSEE RD SUITE 205 ORLANDO, FL 32835

# **Current Mailing Address:**

2295 S HIAWASSEE RD SUITE 205 ORLANDO, FL 32835 US

FEI Number: 30-1381041 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

HUTTER ACCOUNTING AND CONSULTING SERVICES 2295 S HIAWASSEE RD SUITE 205 ORLANDO, FL 32835 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:

Title

City-State-Zip:

Date Electronic Signature of Registered Agent

Address

Authorized Person(s) Detail:

Title **AMBR** Title **AMBR** 

Name CHAIM SABONGE, ALEXANDRE Name DE CARVALHO SABONGE, GISLENE V

**RUA GENTIL OTOBONI 75 AQUARIOS** Address

City-State-Zip: SAO JOSE DOS CAMPOS SP 12246--City-State-Zip: SAO JOSE DOS CAMPOS SP 12246--

**AMBR** 

Title **AMBR** DE CARVALHO SABONGE, BARBARA Name

DE CARVALHO SABONGE, JOAO Name Address **RUA GENTIL OTOBONI 75 AQUARIOS FERNANDO** 

Address

SAO JOSE DOS CAMPOS SP 12246--

SAO JOSE DOS CAMPOS SP 12246--City-State-Zip:

053

**RUA GENTIL OTOBONI 75 AQUARIOS** 

RUA GENTIL OTOBONI 75 AQUARIOS

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.