

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000056963

**Entity Name:** JACMEL CARIBBEAN RESTAURANT LLC

**Current Principal Place of Business:**

1000 LEE BLVD  
301  
LEHIGH ACERS, FL 33936

**Current Mailing Address:**

8031 ALLAMANDA CT  
LEHIGH ACRES, FL 33972

**FEI Number:** 86-1798963

**Certificate of Status Desired:** No

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

FILS, JACQUELINE  
8031 ALLAMANDA CT  
LEHIGH ACRES, FL 33972 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 MGR  
Name FILS, CLEBSON  
Address 8031 ALLAMANDA CT  
City-State-Zip: LEHIGH ACERS FL 33972

*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:** CLEBSON FILS

MGR

02/01/2023

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

\_\_\_\_\_  
Date