## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000270209

Entity Name: IBI TEAMS LLC

**FILED** Apr 08, 2024 **Secretary of State** 9531464195CC

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

2409 W NORTH A STREET

UNIT 2

TAMPA, FL 33609

## **Current Mailing Address:**

2409 W NORTH A STREET UNIT 2

TAMPA, FL 33609 US

**FEI Number: APPLIED FOR** Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

GOMEZ BERET, HORACIO 7160 102ND LN SEMINOLE, FL 33772 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:

City-State-Zip:

City-State-Zip:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail:

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

DRIUSSI, CLAUDIA M TESSAROLO, MIGUEL A Name Name Address 2409 W NORTH A STREET Address 2409 W NORTH A STREET

> UNIT 2 UNIT 2

TAMPA FL 33609 **TAMPA FL 33609** City-State-Zip:

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

TESSAROLO, ALMERY M TESSAROLO, NINA M Name Name

2409 W NORTH A STREET 2409 W NORTH A STREET Address Address

> UNIT 2 UNIT 2

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.

TAMPA FL 33609

TAMPA FL 33609

City-State-Zip: