

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000275730

**Entity Name:** MRS TASTE LLC

**Current Principal Place of Business:**

4400 NW 133RD ST  
OPA LOCKA, FL 33054

**Current Mailing Address:**

4400 NW 133RD ST  
OPA LOCKA, FL 33054 US

**FEI Number:** 87-1633439

**Certificate of Status Desired:** No

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

ARORA, KARAN  
4400 NW 133RD ST  
OPA LOCKA, FL 33054 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:** /KARAN ARORA/

02/19/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ARORA, KARAN  
Address 5337 SW 183RD AVE  
City-State-Zip: MIRAMAR FL 33029

*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:** /KARAN ARORA/

PRES

02/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date