

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000330753

**Entity Name:** MULTISERVICES 24/7 L.L.C.

**Current Principal Place of Business:**

801 NW 9TH ST  
SOUTH  
HALLANDALE BEACH, FL 33009

**Current Mailing Address:**

801 NW 9TH ST  
SOUTH  
HALLANDALE BEACH, FL 33009 US

**FEI Number:** 87-1832381

**Certificate of Status Desired:** No

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

ACHKAR, SALEM  
801 NW 9TH ST  
SOUTH  
HALLANDALE BEACH, FL 33009 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 ACHKAR, SALEM  
Address 801 NW 9TH ST  
City-State-Zip: HALLANDALE BEACH FL 33009

Title AMBR  
Name FERRER, ISEL  
Address 801 NW 9TH ST  
City-State-Zip: HALLANDALE BEACH FL 33009

*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:** SALEM ACHKAR

SALEM ACHKAR

02/19/2022

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

\_\_\_\_\_  
Date