

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000330753

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

**Current Principal Place of Business:**

5955 NW 105TH CT  
APT 701  
DORAL, FL 33178

**Current Mailing Address:**

5955 NW 105TH CT  
APT 701  
DORAL, FL 33178 US

**FEI Number:** 87-1832381

**Certificate of Status Desired:** No

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

ACHKAR, SALEM  
5955 NW 105TH CT  
APT 701  
DORAL, FL 33178 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	Title	AMBR
Name	ACHKAR, SALEM	Name	FERRER, ISEL
Address	5955 NW 105TH CT APT 701	Address	5955 NW 105TH CT APT 701
City-State-Zip:	DORAL FL 33178	City-State-Zip:	DORAL FL 33178

*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

SA

04/20/2023

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

\_\_\_\_\_  
Date