

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000016901

Entity Name: LEVANT ENTERPRISES, LLC

Current Principal Place of Business:

7005 E. 14TH. AVE.
TAMPA, FL 33619

FILED
Feb 24, 2015
Secretary of State
CC4076047449

Current Mailing Address:

PO BOX 75301
TAMPA, FL 33675 US

FEI Number: 59-3756043

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEVANT, LEE A PRES
7005 E. 14TH. AVE.
TAMPA, FL 33619 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	MGRM	Title	MGRM
Name	LEVANT, LEE A	Name	LEVANT, SARAH E
Address	7005 E. 14TH. AVE.	Address	7005 E. 14TH. AVE.
City-State-Zip:	TAMPA FL 33619	City-State-Zip:	TAMPA FL 33619

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: LEE LEVANT

MANAGER

02/24/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date