

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000022265

Entity Name: VISUAL ACOUSTICS, L.L.C.

Current Principal Place of Business:

591 NW 35 ST
MIAMI, FL 33127

Current Mailing Address:

591 NW 35 ST
MIAMI, FL 33127 US

FEI Number: 57-1173349

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEWIN, MARC D
591 NW 35 ST
MIAMI, FL 33127 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
Name FLORIDA AUDIO WORKSHOP, INC.
Address 591 NW 35 STREET
City-State-Zip: MIAMI FL 33127

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: MARC LEWIN

MGRM

03/27/2018

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date