

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000113870

**Entity Name:** ANJAY ACCOUNTAX SERVICE FL, LLC

**Current Principal Place of Business:**

704 LEGACY PARK DRIVE  
CASSELBERRY, FL 32707

**Current Mailing Address:**

591 SUMMIT AVE  
203  
JERSEY CITY, NJ 07306

**FEI Number:** 20-8319830

**Certificate of Status Desired:** No

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

HATHIWALA, HARISH  
704 LEGACY PARK DRIVE  
CASSELBERRY, FL 32707 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 HATHIWALA, HARISH  
Address 591 SUMMIT AVE, STE 203  
City-State-Zip: JERSEY CITY NJ 07306

*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:** HATHIWALA, HARISH

MGRM

02/11/2019

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

\_\_\_\_\_  
Date