

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000072169

Entity Name: ILLUSIONS-N-ART BY RHONDA KRIS, LLC

Current Principal Place of Business:

645 99TH AVENUE N., APT. WEST
NAPLES, FL 34108

Current Mailing Address:

4845 GREEN BLVD
NAPLES, FL 34116

FEI Number: 14-2005615

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALL FLORIDA FIRM INC.
813 DELTONA BLVD
STE A
DELTONA, FL 32725 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 KRIS, RHONDA F
Address 4845 GREEN BLVD.
City-State-Zip: NAPLES FL 34116

Title MGR
Name BOYAN, JULIE
Address 533 92ND AVENUE N UNIT A
City-State-Zip: NAPLES FL 34108

Title AMBR
Name REYES, ANGEL
Address 19191 TANGERINE RD
City-State-Zip: FT MYERS FL 33967

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: RHONDA KRIS

02/18/2018

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date