## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000097169

Entity Name: SENSATIONAL EXPERIENCES, LLC

**Current Principal Place of Business:** 

7171 CORAL WAY SUITE 104A MIAMI. FL 33155

**Current Mailing Address:** 

7171 CORAL WAY SUITE 104A MIAMI, FL 33155 US

FEI Number: 26-2232458 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOENAGA, CARMEN JULIA 13457 NW 8 ST MIAMI, FL 33182 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: CARMEN J GOENAGA 01/09/2017

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR

Name GOENAGA, CARMEN JULIA

Address 13457 NW 8 ST City-State-Zip: MIAMI FL 33182

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: CARMEN J GOENAGA

**MANAGER** 

01/09/2017

FILED Jan 09, 2017

**Secretary of State** 

CC6904476989

Date

Date