## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000020696

Entity Name: FISHBUSTERZ DELIVERY, LLC

**Current Principal Place of Business:** 

6406 MALONEY AVE KEY WEST, FL 33040

**Current Mailing Address:** 

P.O. BOX 169

KEY WEST. FL 33040 US

FEI Number: 26-2154430 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEHAR, BRIAN SESQ DCOTA, SUITE A-350 1855 GRIFFIN ROAD

FORT LAUDERDALE, FL 33004 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

FILED Jun 09, 2020

**Secretary of State** 

8826647160CC

## Authorized Person(s) Detail:

Title AUTHORIZED MEMBER

Name RENIER, CHARLES

Address

PO BOX 169

City-State-Zip: KEY WEST FL 33041

Title AUTHORIZED MEMBER

AUTHORIZED MEMBER

AUTHORIZED MEMBER

AUTHORIZED MEMBER

AUTHORIZED MEMBER

AUTHORIZED MEMBER

So PALMETTO DRIVE

City-State-Zip: KEY WEST FL 33040

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.