

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000001933

**FILED**  
**Jan 16, 2020**  
**Secretary of State**  
**5887581223CC**

**Entity Name:** ILMAX LLC

**Current Principal Place of Business:**

3900 HOLLYWOOD BLVD.  
SUITE 103  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

3101 S. OCEAN DR.  
403  
HOLLYWOOD, FL 33019 US

**FEI Number:** 26-4037632

**Certificate of Status Desired:** Yes

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

FEDER, LAWRENCE H  
3900 HOLLYWOOD BLVD.  
SUITE 103  
HOLLYWOOD, FL 33021 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 MGR  
Name ESTERKINS, LEONIDS  
Address 3900 HOLLYWOOD BLVD, SUITE 103  
City-State-Zip: HOLLYWOOD FL 33021

Title MGR  
Name ESTERKINS, MAKSIMS  
Address 3900 HOLLYWOOD BLVD, SUITE 103  
City-State-Zip: HOLLYWOOD FL 33021

Title MGR  
Name ASSETSTZ HOLDING LLC  
Address 3101 S. OCEAN DR.  
403  
City-State-Zip: HOLLYWOOD FL 33019

*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:** VAL ZEVEL

**MGR**

**01/16/2020**

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

\_\_\_\_\_  
Date