

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000037802

**Entity Name:** AMERICAN DREAM HANDYMAN, LLC

**Current Principal Place of Business:**

166 WOOD RIDGE TRAIL  
SANFORD, FL 32771

**Current Mailing Address:**

166 WOOD RIDGE TRAIL  
SANFORD, FL 32771 US

**FEI Number:** 27-1834215

**Certificate of Status Desired:** No

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

MORALES, NANCY  
166 WOOD RIDGE TRAIL  
SANFORD, FL 32771 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            PRESIDENT  
Name            MORALES, NANCY  
Address        166 WOOD RIDGE TRAIL  
City-State-Zip: SANFORD FL 32771

Title            VP  
Name            MORALES, ANGEL  
Address        166 WOOD RIDGE TRAIL  
City-State-Zip: SANFORD FL 32771

*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:** NANCY MORALES

**PRESIDENT**

**04/26/2019**

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

\_\_\_\_\_  
Date