

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000067924

**Entity Name:** ANNIKA 6, LLC

**Current Principal Place of Business:**

450 N PARK ROAD  
SUITE 711  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

PO BOX 221453  
HOLLYWOOD, FL 33022 US

**FEI Number:** 27-2940901

**Certificate of Status Desired:** No

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

KENNETH R CARMAN MANAGEMENT LLC  
450 N PARK ROAD  
SUITE 711  
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:** ANNIKA CARMAN

04/12/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name KENNETH R CARMAN MANAGEMENT LLC  
Address PO BOX 221453  
City-State-Zip: HOLLYWOOD FL 33022

*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:** ANNIKA CARMAN

**BUSINESS MANAGER**

04/12/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date