

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000032851

Entity Name: BEAD ENTERPRISES (IM) LLC**Current Principal Place of Business:**8174 NW 31 ST
DORAL, FL 33122**Current Mailing Address:**8174 NW 31 ST
DORAL, FL 33122 US**FEI Number:** 45-1630996**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THE BOOLCHAND GROUP, LLC
8174 NW 31 ST
DORAL, FL 33122 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:** JAI NANDWANI

03/18/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	P	Title	VP
Name	NANDWANI, HARESH D	Name	NANDWANI, RAMCHAND D.B.
Address	444 BRICKELL AVE SUITE 51-511	Address	444 BRICKELL AVE SUITE 51-511
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131
Title	T	Title	MGR/S
Name	ZWETSLOOT, ANDRE	Name	NANDWANI, RAVEE R.B.
Address	444 BRICKELL AVE SUITE 51-511	Address	444 BRICKELL AVE SUITE 51-511
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131
Title	MGR		
Name	NAND WANI, JAI		
Address	8174 NW 31 ST		
City-State-Zip:	MIAMI FL 33122		

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: JAI NANDWANI

MGR

03/18/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date