

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000036988

**Entity Name:** FLORIDA MARTIAL ARTS LLC

**Current Principal Place of Business:**

15893 PINES BLVD  
PEMBROKE PINES , FL 33027

**Current Mailing Address:**

15893 PINES BLVD  
PEMBROKE PINES , FL 33027 US

**FEI Number:** 45-1476896

**Certificate of Status Desired:** No

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

ASESOR, JEFFREY C  
20305 SW 1 STREET  
PEMBROKE PINES, FL 33029 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           MANAGER  
Name           ASESOR, J.  
Address       15893 PINES BLVD  
City-State-Zip:   PEMBROKE PINES   FL 33027

Title           CFO  
Name           ASESOR, J.  
Address       15893 PINES BLVD  
City-State-Zip:   PEMBROKE PINES   FL 33027

*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:** J. ASESOR

**MANAGER**

**05/03/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date