

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000013611

**Entity Name:** LIMITLESS MARTIAL ARTS & FITNESS, LLC**Current Principal Place of Business:**1901 NORTH PINE ISLAND ROAD  
PLANTATION, FL 33322**Current Mailing Address:**1901 NORTH PINE ISLAND ROAD  
PLANTATION, FL 33322 US**FEI Number:** 80-0786431**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BECKER & POLIAKOFF, P.A.  
1 EAST BROWARD BLVD  
SUITE 1800  
FORT LAUDERDALE, FL 33301 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:** JON POLENBERG

03/20/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name GONZALEZ, LUIS J  
Address 1 EAST BROWARD BLVD  
SUITE 1800  
City-State-Zip: FORT LAUDERDALE FL 33301

Title AUTHORIZED MEMBER  
Name GONZALEZ, JOSE HERNAN JR.  
Address 1901 N PINE ISLAND RD  
City-State-Zip: PLANTATION FL 33322

Title AUTHORIZED MEMBER  
Name GONZALEZ, JOSE HERNAN SR.  
Address 1901 N PINE ISLAND RD  
City-State-Zip: PLANTATION FL 33322

Title AUTHORIZED MEMBER  
Name GONZALEZ, YANIRA LEONOR  
Address 1901 N PINE ISLAND RD  
City-State-Zip: PLANTATION FL 33322

*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:** LUIS GONZALEZ**MANAGER**

03/20/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date