## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000024208

Entity Name: MAWS USA #2, LLC

## **Current Principal Place of Business:**

1830 S. OCEAN DR. **UNIT 1802** 

HALLANDALE BEACH, FL 33009

**Current Mailing Address:** 

1830 S. OCEAN DR.

**UNIT 1802** 

HALLANDALE BEACH, FL 33009 US

FEI Number: 99-0373764 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSALES COHEN, ARIEH 1830 S OCEAN DR UNIT 1802 HALLANDALE BEACH, FL 33009 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: ARIEH ROSALES COHEN 03/04/2024

Electronic Signature of Registered Agent

Date

**FILED** Mar 04, 2024

**Secretary of State** 

7293297229CC

Authorized Person(s) Detail:

Title MGR Title MGR

ROSALES COHEN, ARIEH ROSALES BENARROCH, BENJAMIN Name Name

Address 1830 S OCEAN DR #1802 Address 1830 S. OCEAN DR.

**UNIT 1802** 

City-State-Zip: HALLANDALE BEACH FL 33009 HALLANDALE BEACH FL 33009 City-State-Zip:

Title **MANAGER** 

Title **MANAGER** ROSALES BENARROCH, MOISES Name

ROSALES BENARROCH, JOSY Name Address 1830 S. OCEAN DR.

1830 S. OCEAN DR. Address **UNIT 1802** 

**UNIT 1802** HALLANDALE BEACH FL 33009

City-State-Zip: HALLANDALE BEACH FL 33009 City-State-Zip:

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.