

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000039198

**Entity Name:** 455 TARPON AVENUE, LLC

**Current Principal Place of Business:**

9469 RIDGE BLVD  
BROOKLYN, NY 11209

**Current Mailing Address:**

PO BOX 090-353  
BROOKLYN, NY 11209 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

PSARELLIS  
9469 RIDGE BLVD  
BROOKLYN, FL 11209 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:** MARIO A PSARELLIS

04/08/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name PSARELLIS, STEPHANOS C  
Address PO BOX 090-353  
City-State-Zip: BROOKLYN NY 11209

Title MGR  
Name PSARELLIS, MARIO C  
Address PO BOX 090-353  
City-State-Zip: BROOKLYN NY 11209

Title MGR  
Name NOTIAS, CAROL C  
Address PO BOX 090-353  
City-State-Zip: BROOKLYN NY 11209

*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:** MARIO PSARELLIS

MGR

04/08/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date