

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000153930

**Entity Name:** TRAFALGAR 803, LLC

**Current Principal Place of Business:**

1410 SOUTH OCEAN DRIVE  
UNIT 803  
HOLLYWOOD, FL 33019

**FILED**  
**Apr 25, 2014**  
**Secretary of State**  
**CC6913826013**

**Current Mailing Address:**

29 BROCKINGTON CRESCENT  
TORONTO, ON M3H4S-9 CA

**FEI Number: APPLIED FOR**

**Certificate of Status Desired: No**

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

DOUBLE D. PROCESSING, INC.  
2999 NE 191 STREET, SUITE 805  
AVENTURA, FL 33180 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	MGRM	Title	MGRM
Name	GURFINKEL, IGOR	Name	GURFINKEL, NADIA
Address	29 BROCKINGTON CRESCENT	Address	29 BROCKINGTON CRESCENT
City-State-Zip:	TORONTO ON M3H4S-9	City-State-Zip:	TORONTO ON M3H4S-9

*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: IGOR GURFINKEL**

**MGRM**

**04/25/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date