

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000167960

Entity Name: 40 40 ISLAND ESTATES LLC**Current Principal Place of Business:**WATERGARDENS 6
24

GIBALTAR, GX11-1AA

Current Mailing Address:WATERGARDENS 6
24

GIBALTAR, GX11-1AA AF

FEI Number: APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DADE COUNTY CORPORATE AGENTS, INC.
20295 NE 29 PLACE
200
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	MGR
Name	EUROPA DIRECTORS LIMITED
Address	WATERGARDENS 6 24
City-State-Zip:	GIBALTAR GX11-1AA

Title	MGR
Name	EUROPA NOMINEES (GIBALTAR) LIMITED
Address	WATERGARDENS 6 24
City-State-Zip:	GIBALTAR GX11-1AA

Title	MR.
Name	SHOHET, HILLEL
Address	P.O.BOX 222116
City-State-Zip:	GREAT NECK NY 11022

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: HILLEL SHOHET

MANAGER

02/07/2021

Electronic Signature of Signing Authorized Person(s) Detail_____
Date