	iling Address:			
29 CORELL				
WESTLEIG	H, NSW, 2120 AU			
FEI Number: 35-2512776			Certificate of Status Desired: No	
Name and	Address of Current Registered Age	nt:		
	L INTERNATIONAL			
	E, FL 33823 US			
		nging its registered office or regis	tered agent, or both, in the State of Florida.	
AUBURNDALE	, FL 33823 US	nging its registered office or regis	tered agent, or both, in the State of Florida. 03/28	8/201
AUBURNDALE	E, FL 33823 US	nging its registered office or regis	03/28	8/201 Date
AUBURNDALE The above name SIGNATUR	e, FL 33823 US ad entity submits this statement for the purpose of cha E: SUSAN HARDING	anging its registered office or regis	03/28	
AUBURNDALE The above name SIGNATUR Authorized	E, FL 33823 US ed entity submits this statement for the purpose of cha E: SUSAN HARDING Electronic Signature of Registered Agent	anging its registered office or regis	03/28	
AUBURNDALE The above name SIGNATUR Authorized Title	E, FL 33823 US ed entity submits this statement for the purpose of cha E: SUSAN HARDING Electronic Signature of Registered Agent Person(s) Detail :		03/28 D	
AUBURNDALE The above name SIGNATUR	<ul> <li>FL 33823 US</li> <li>ed entity submits this statement for the purpose of che</li> <li>E: SUSAN HARDING</li> <li>Electronic Signature of Registered Agent</li> <li>Person(s) Detail :</li> <li>AMBR</li> </ul>	Title	03/28 D AMBR TEMPONGKO, LYRAE FLAT 3-4 9/F BLOCK B PROFICIENT	
AUBURNDALE The above name SIGNATUR Authorized Title Name Address	E, FL 33823 US ed entity submits this statement for the purpose of cha E: SUSAN HARDING Electronic Signature of Registered Agent <b>Person(s) Detail :</b> AMBR KON, POOI LENG	Title Name	03/28 D AMBR TEMPONGKO, LYRAE FLAT 3-4 9/F BLOCK B PROFICIENT INDUSTRIAL	

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: POOI LENG KON

AMBR

03/28/2018

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000121261

Entity Name: LTJK FLORIDA LLC

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

29 CORELLA WAY WESTLEIGH, NSW, 2120

Electronic Signature of Signing Authorized Person(s) Detail

## FILED Mar 28, 2018 **Secretary of State** CC8012589068

Date