

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000146792

Entity Name: SYMPLAST LLC

Current Principal Place of Business:

205 SW 84TH AVENUE
PLANTATION, FL 33324

Current Mailing Address:

205 SW 84TH AVENUE
PLANTATION, FL 33324

FEI Number: 47-1933670

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KUSUMA, SHASHI DR.
205 SW 84TH AVENUE
PLANTATION, FL 33324 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 AUTHORIZED MEMBER
Name CHATURVEDI, PANKAJ
Address 10868 GARDEN RIDGE COURT
City-State-Zip: DAVIE FL 33328

Title MGR
Name KUSUMA, SHASHI DR.
Address 205 SW 84TH AVENUE
City-State-Zip: PLANTATION FL 33324

Title AMBR
Name VASISHT, BHUPESH DR.
Address 205 SW 84TH AVENUE
City-State-Zip: PLANTATION FL 33324

Title AMBR
Name BATRA, MUNISH DR.
Address 205 SW 84TH AVENUE
City-State-Zip: PLANTATION FL 33324

Title AMBR
Name BHARRIPROLU, RAVISH
Address 205 SW 84TH AVENUE
City-State-Zip: PLANTATION FL 33324

Title AMBR
Name MILLER, JACQUELINE N
Address 7001 NW 70TH STREET
City-State-Zip: PARKLAND FL 33067

Title AMBR
Name NARANG, MUKESH
Address 205 SW 84TH AVENUE
City-State-Zip: PLANTATION FL 33324

Title AMBR
Name CHATURVEDI, PANKAJ
Address 205 SW 84TH AVENUE
City-State-Zip: PLANTATION FL 33324

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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: JACQUELINE MILLER

COO

01/08/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title AMBR
Name PARKSIDE INVESTMENTS LLC
Address 205 SW 84TH AVENUE
City-State-Zip: PLANTATION FL 33324

Title AUTHORIZED MEMBER
Name GB WELDING AND FABRICATION LLC
Address 205 SW 84TH AVENUE
City-State-Zip: PLANTATION FL 33324

Title AUTHORIZED MEMBER
Name JAIN, SHWETA
Address 205 SW 84TH AVENUE
City-State-Zip: PLANTATION FL 33324

Title AUTHORIZED MEMBER
Name TRANSFORMATIONS PLASTIC SURGERY LLC
Address 205 SW 84TH AVENUE
City-State-Zip: PLANTATION FL 33324