

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000011289

**Entity Name:** SENSORY DELIGHTS, LLC

**Current Principal Place of Business:**

19362 NW 11TH STREET  
PEMBROKE PINES, FL 33029

**Current Mailing Address:**

19362 NW 11TH STREET  
PEMBROKE PINES, FL 33029 US

**FEI Number:** 47-2834471

**Certificate of Status Desired:** No

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

LEMAIRE, ALAIN  
1420 NE 201ST TERRACE  
MIAMI, FL 33179 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	AMBR	Title	AMBR
Name	LEMAIRE, ALAIN	Name	BELANCOURT-HERAUX, NEIMA
Address	1420 NE 201ST TERRACE	Address	19362 NW 11TH STREET
City-State-Zip:	MIAMI FL 33179	City-State-Zip:	PEMBROKE PINES FL 33029

*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:** ALAIN LEMAIRE

AMBR

02/10/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date