

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000152072

**Entity Name:** STYLE 911 LLC

**Current Principal Place of Business:**

21222 NE 32ND PL  
AVENTURA, FL 33180

**Current Mailing Address:**

21222 NE 32ND PL  
AVENTURA, FL 33180 US

**FEI Number:** 47-5031548

**Certificate of Status Desired:** No

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

COHEN, ABRAHAM A  
21222 NE 32ND PL  
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	Title	MGR
Name	ISRAEL, JUDITH K	Name	IGLICKI, SANDRA S
Address	21222 NE 32ND PL	Address	2375 NE 195TH ST
City-State-Zip:	AVENTURA FL 33180	City-State-Zip:	MIAMI FL 33180
Title	MGR		
Name	BEN ZAKEN, INBAL		
Address	19428 NE 17TH AVENUE		
City-State-Zip:	NORTH MIAMI BEACH FL 33179		

*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:** JUDITH KARINA ISRAEL

**DIRECTOR**

**04/06/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date