

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000193065

**Entity Name:** TIME TRAP ESCAPE ROOM, LLC

**Current Principal Place of Business:**

9270 BAY PLAZA BLVD  
SUITE 630  
TAMPA, FL 33619

**FILED**  
**Sep 02, 2019**  
**Secretary of State**  
**0323222137CC**

**Current Mailing Address:**

12519 HERONS PATH PL  
RIVERVIEW, FL 33578 US

**FEI Number: 81-4325152**

**Certificate of Status Desired: No**

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

LEGALCORP SOLUTIONS, LLC  
3440 W HOLLYWOOD BLVD  
STE 415  
HOLLYWOOD, FL 33021 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	KNOTT, KEVIN	Name	KNOTT, KRISTINA
Address	12519 HERONS PATH PL	Address	12519 HERONS PATH PL
City-State-Zip:	RIVERVIEW FL 33578	City-State-Zip:	RIVERVIEW FL 33578

*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: KRISTINA KNOTT**

**OWNER**

**09/02/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date