

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Mar 01, 2018
Secretary of State
CC7937086935

Entity Name: HOUSE OF PAIN ENTERTAINMENT,"LLC"

Current Principal Place of Business:

50 N.E 213 ST
MIAMI, FL 33179

Current Mailing Address:

50 N.E 213 ST
MIAMI, FL 33179 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JEAN PHILIPPE, JEAN RAYMOND JR.,
50 N.E 213TH STREET
MIAMI GARDENS, 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 OWNER, FOUNDER, CEO
Name JEAN PHILIPPE, JEAN RAYMOND JR.,
Address 50 NE 213ST
City-State-Zip: MIAMI FL 33179

Title CO-OWNER
Name APPEL, DAVID SR.
Address 13500 NE 3RD CT
 308
City-State-Zip: NORTH MIAMI FL 33161

Title CO-OWNER
Name DENNIS, SHAWN SR.
Address 407 NW 9TH COURT
City-State-Zip: HOMESTEAD FL 33030

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: JEAN RAYMOND JEAN PHILIPPE

OWNER

03/01/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date