

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000032027

**Entity Name:** CFL M807ST LLC

**Current Principal Place of Business:**

56 EXCELSIOR AVE  
STATEN ISLAND, NY 10309

**Current Mailing Address:**

56 EXCELSIOR AVE  
STATEN ISLAND, NY 10309

**FEI Number:** 81-1539021

**Certificate of Status Desired:** No

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

SPEKTOR, ARKADIY  
501 NE 14 AVE  
306  
HALLANDALE, FL 33009 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           MANAGER  
Name           SLAVIN, IGOR  
Address        56 EXCELSIOR AVE  
City-State-Zip: STATEN ISLAND NY 10309

Title           MANAGER  
Name           INOYATOVA, INNA  
Address        56 EXCELSIOR AVE  
City-State-Zip: STATEN ISLAND NY 10309

Title           AUTHORIZED MEMBER  
Name           M2I-HOLDING CORP  
Address        56 EXCELSIOR AVE  
City-State-Zip: STATEN ISLAND NY 10309

*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:** IGOR SLAVIN

**MANAGER**

**02/10/2020**

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

\_\_\_\_\_  
Date