2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000059867

Entity Name: LIGHTING PARADISE, LLC

Current Principal Place of Business:

5455 SW 8TH STREET, #135

MIAMI. FL 33134

Current Mailing Address:

P.O. BOX 440913 MIAMI, FL 33144 US

FEI Number: 65-0317295 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CABO, ANDRES 5455 SW 8TH STREET, #135 MIAMI, FL 33134 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

FILED Feb 17, 2017

Secretary of State

CC9256914251

Authorized Person(s) Detail:

Title **PRESIDENT** Title VΡ

CABO, ANDRES Name CABO, DORIS Name Address P.O. BOX 440913 Address P.O. BOX 440913 City-State-Zip: MIAMI FL 33144 MIAMI FL 33144 City-State-Zip:

Title DIRECTOR Title DIRECTOR

Name CABO, ANGELICA Name MORELL, MARCOS Address P.O. BOX 440913 Address P.O. BOX 440913 MIAMI FL 33144 City-State-Zip: MIAMI FL 33144 City-State-Zip:

Title DIRECTOR Title **DIRECTOR** Name CABO, NATALIE CABO, DORIS Name Address P.O. BOX 440913 P.O. BOX 440913 Address City-State-Zip: MIAMI FL 33144

Title DIRECTOR

City-State-Zip:

CABO, ANDREINA Name Address P.O. BOX 440913 MIAMI FL 33144 City-State-Zip:

MIAMI FL 33144

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.

02/17/2017 SIGNATURE: ANDRES CABO **PRESIDENT**