

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000177418

**Entity Name:** ISLAND ENTITY LLC

**Current Principal Place of Business:**

4863 WEST COLONIAL DR.  
ORLANDO, FL 32808

**Current Mailing Address:**

4985 WEST COLONIAL DR  
ORLANDO, FL 32808 US

**FEI Number: 81-4043729**

**Certificate of Status Desired:** No

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

GHEITH, MOHAMMAD S  
4985 WEST COLONIAL DR  
ORLANDO, FL 32808 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  
Name GHEITH, MOHAMMAD  
Address 4985 WEST COLONIAL DR  
City-State-Zip: ORLANDO FL 32808

*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: GHEITH MOHAMMAD**

**MGR**

**04/09/2017**

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

\_\_\_\_\_  
Date