## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000050750

Entity Name: HALOGEN STUDIOS, LLC

**Current Principal Place of Business:** 

127 WEST FAIRBANKS AVE, #157 WINTER PARK. FL 32789

**Current Mailing Address:** 

127 WEST FAIRBANKS AVE,#157 WINTER PARK, FL 32789 US

FEI Number: 35-2587876 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FISHER, TREY 127 WEST FAIRBANKS AVE,#157 WINTER PARK, FL 32789 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: TREY FISHER 04/19/2018

Electronic Signature of Registered Agent

Date

FILED Apr 19, 2018

**Secretary of State** 

CC3279224715

Authorized Person(s) Detail:

Title PRES Title CFO

Name BRANNEN, CHANCE Name MILLER, R GABE

Address 127 WEST FAIRBANKS AVE, #157 Address 127 WEST FAIRBANKS AVE, #157

City-State-Zip: WINTER PARK FL 32789 City-State-Zip: WINTER PARK FL 32789

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.

Electronic Signature of Signing Authorized Person(s) Detail