

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000156083

**Entity Name:** ULTIMATE PRODS LLC

**Current Principal Place of Business:**

17555 COLLINS AVENUE  
SUITE 404  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

5420 SYLMAR AVENUE  
APT 314  
SHERMAN OAKS, CA 91401 US

**FEI Number:** 82-2240760

**Certificate of Status Desired:** No

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

BUROVA, ALENA  
17555 COLLINS AVENUE  
SUITE 404  
SUNNY ISLES BEACH, FL 33160 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 AMBR  
Name BUROVA, ALENA  
Address 17555 COLLINS AVENUE  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title AMBR  
Name FAUGEROLAS, GEOFFROY  
Address 5420 SYLMAR AVE  
#314  
City-State-Zip: SHERMAN OAKS CA 91401

*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:** GEOFFROY FAUGEROLAS

AMBR

01/08/2019

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

\_\_\_\_\_  
Date