

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000215988

**Entity Name:** SYGMA POINT CONCESSIONS, LLC.

**Current Principal Place of Business:**

6700 INDIAN CREEK DR  
APT. 708  
MIAMI BEACH, FL 33141

**Current Mailing Address:**

6700 INDIAN CREEK DR  
APT. 708  
MIAMI BEACH, FL 33141 US

**FEI Number:** 81-3150179

**Certificate of Status Desired:** Yes

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

NORTHWEST REGISTERED AGENT LLC  
7901 4TH ST N  
STE 300  
ST. PETERSBURG, FL 33702 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 HOSSAIN, SAMIRA  
Address 6700 INDIAN CREEK DR  
APT. 708  
City-State-Zip: MIAMI BEACH FL 33141

*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:** SAMIRA HOSSAIN

**MGR**

**04/03/2024**

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

\_\_\_\_\_  
Date