

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000231383

**Entity Name:** DR. FISHMAN LABS LLC

**Current Principal Place of Business:**

2701 NW 29TH TER  
LAUDERDALE LAKES, FL 33311

**Current Mailing Address:**

6830 SIENNA CLUB DR  
LAUDERHILL, FL 33319

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

ZEHAVI, DAVID  
6830 SIENNA CLUB DR  
LAUDERHILL, FL 33319 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 ASH GROUP OF FLORIDA INC  
Address 2342 THOMAS ST  
City-State-Zip: HOLLYWOOD FL 33020

Title AMBR  
Name GNS WHOLESALE CORP  
Address 4930 NW 65TH AVE  
City-State-Zip: LAUDERHILL FL 33319

Title AMBR  
Name BEST WELLNESS CORP  
Address 2701 NW 29TH TER  
City-State-Zip: LAUDERDALE LAKES FL 33311

*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:** ASH GROUP OF FLORIDA INC

AMBR

04/19/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date