

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000253230

Entity Name: APOLOMARS LLC

Current Principal Place of Business:

9462 NW 46TH ST
SUNRISE, FL 33351

Current Mailing Address:

9462 NW 46TH ST
SUNRISE, FL 33351 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALEXANDER, JOE
9462 NW 46TH ST
SUNRISE, FL 33351 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 ALEXANDER, JOE
Address 9462 NW 46TH ST
City-State-Zip: SUNRISE FL 33351

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: JOE ALEXANDER

OWNER

02/27/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date