

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000000818

**Entity Name:** MALKA GROUP LLC

**Current Principal Place of Business:**

1752 SAWGRASS CIRCLE  
GREENACRES, FL 33412

**Current Mailing Address:**

51 SHEPARD AVE  
STATEN ISLAND, NY 10314 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MALKA, RAQUEL D  
1752 SAWGRASS CIRCLE  
GREENACRES, FL 33412 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            MALKA, RAQUEL  
Address        51 SHEPARD AVE  
City-State-Zip: STATEN ISLAND NY 10314

*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:** RAQUEL MALKA

**REGISTERED AGENT**

**01/17/2020**

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

\_\_\_\_\_  
Date