

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000046090

Entity Name: SUPP CENTER LLC

Current Principal Place of Business:

16465 NE 22ND AVE STE 101
NORTH MIAMI BEACH, FL 33160

Current Mailing Address:

16465 NE 22ND AVE STE 101
NORTH MIAMI BEACH, FL 33160

FEI Number: 82-4591134

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORA, ILKA S
16465 NE 22ND AVE STE 101
NORTH MIAMI 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 MORA, ILKA S
Address 16465 NE 22ND AVE STE 101
City-State-Zip: NORTH MIAMI BEACH FL 33160

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: ILKA S MORA

04/30/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date