

2020 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L18000147880

Entity Name: BOMBSQWAAD ENT. LLC**Current Principal Place of Business:**7766 ORLEANS ST
MIRAMAR, FL 33023**Current Mailing Address:**7766 ORLEANS ST
MIRAMAR, FL 33023 UN**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HUTCHINSON, JAWAAN W
7921 RAMONA ST
MIRAMAR, FL 33023 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:** JAWAAN HUTCHINSON

07/17/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name WILSON, HUSANI L
Address 7766 ORLEANS ST
City-State-Zip: MIRAMAR FL 33023

Title AMBR
Name WILSON, ADISA N
Address 7766 ORLEANS ST
City-State-Zip: HOLLYWOOD FL 33023

Title AMBR
Name BENNETT, GREGORY D
Address 2310 SW 80TH TERR.
City-State-Zip: MIRAMAR FL 33025

Title AMBR
Name WILSON, SHOMARI A
Address 7766 ORLEANS ST
City-State-Zip: HOLLYWOOD FL 33023

Title AMBR
Name WILSON, PHILIP N III
Address 732 SW 106TH AVE
City-State-Zip: PEMBROKE PINES FL 33025

Title MANAGER, AUTHORIZED
REPRESENTATIVE, AUTHORIZED
MEMBER
Name HUTCHINSON, JAWAAN WINSTON
Address 7921 RAMONA ST
City-State-Zip: HOLLYWOOD FL 33023

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: JAWAAN HUTCHINSON

AMBR

07/17/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date