

**2021 FLORIDA LIMITED LIABILITY COMPANY 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:** No

**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

04/30/2021

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:** ADISA WILSON

AMBR

04/30/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date