

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000188018

**Entity Name:** MYSTIC RESIDENCES LLC

**Current Principal Place of Business:**

98 CUTTERMILL ROAD  
SUITE 344 S  
GREAT NECK, NY 11021

**Current Mailing Address:**

98 CUTTERMILL ROAD  
SUITE 344 S  
GREAT NECK, NY 11021 US

**FEI Number:** 83-1472212

**Certificate of Status Desired:** No

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

EBRAHIMIAN, BENJAMIN  
19101 MYSTIC POINTE DRIVE  
404  
AVENTURA, FL 33180 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 MGR  
Name EBRAHIMIAN, ROBERT  
Address 425 MADISON AVE  
City-State-Zip: NEW YORK NY 10017

Title MGR  
Name NADIV, NIMROD  
Address 271-11 UNION TPKE  
City-State-Zip: NEW HYDE PARK NY 11040

Title MGR  
Name BUCHHOLZ, SHANNON  
Address 3500 MYSTIC POINTE DRIVE  
APT 3803  
City-State-Zip: AVENTURA FL 33020

*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:** ROBERT EBRAHIMIAN

MGR

01/16/2023

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

\_\_\_\_\_  
Date