

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000272122

**Entity Name:** WTS WRAP TECH SYSTEMS LLC

**Current Principal Place of Business:**

1835 E HALLANDALE BEACH BLVD  
UNIT 340  
HALLANDALE BEACH, FL 33009

**Current Mailing Address:**

1835 E HALLANDALE BEACH BLVD  
UNIT 340  
HALLANDALE BEACH, FL 33009 US

**FEI Number:** 36-4917078

**Certificate of Status Desired:** No

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

MANN & WOLF LLP  
7800 W OAKLAND PARK BLVD  
SUITE B-104  
SUNRISE, FL 33351 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 SECMAX MANAGEMENT LLC  
Address 1835 E HALLANDALE BEACH BLVD  
UNIT 340  
City-State-Zip: HALLANDALE BEACH FL 33009

*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:** VENESSA FIGUEROA

**OFFICE MANAGER**

**05/01/2023**

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

\_\_\_\_\_  
Date