

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000003860

**Entity Name:** GO PLAN REVENUE USA L.L.C.

**Current Principal Place of Business:**

1747 CARIBBEAN CIRCLE  
VENICE, FL 34293

**Current Mailing Address:**

PO BOX 333  
VENICE, FL 34284 US

**FEI Number:** 83-3062780

**Certificate of Status Desired:** No

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

KOCHAK, FREDERICK  
1747 CARIBBEAN CIRCLE  
VENICE, FL 34293 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 KOCHAK, FREDERICK  
Address 1747 CARIBBEAN CIRCLE  
City-State-Zip: VENICE FL 34293

*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:** FREDERICK GEORGE KOCHAK

GO PLAN REVENUE USA 04/06/2025  
LLC

Electronic Signature of Signing Authorized Person(s) Detail

Date