

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000191840

**Entity Name:** HYPERHAZE LLC

**Current Principal Place of Business:**

719 MONTEREY DR  
SATELLITE BEACH, FL 32937

**Current Mailing Address:**

719 MONTEREY DRIVE  
SATELITE BEACH, FL 32937 US

**FEI Number:** 84-2644802

**Certificate of Status Desired:** Yes

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

REGISTERED AGENTS INC.  
7901 4TH ST N STE 300  
ST. PETERSBURG, FL 33702 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 AMBR  
Name ENGEL, ANTHONY  
Address 719 MONTEREY DR  
City-State-Zip: SATELLITE BEACH FL 32937

Title AMBR  
Name ENGEL, DAWN  
Address 719 MONTEREY DR  
City-State-Zip: SATELLITE BEACH FL 32937

Title AMBR  
Name ENGEL, VICTORIA  
Address 719 MONTEREY DR  
City-State-Zip: SATELLITE BEACH FL 32937

Title AMBR  
Name ENGEL, ALYSSA  
Address 719 MONTEREY DR  
City-State-Zip: SATELLITE BEACH FL 32937

Title AMBR  
Name ENGEL, EMILY  
Address 719 MONTEREY DR  
City-State-Zip: SATELLITE BEACH FL 32937

Title MGR  
Name ENGEL, ANTHONY  
Address 719 MONTEREY DR  
City-State-Zip: SATELLITE BEACH FL 32937

*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:** ANTHONY JASON ENGEL

**CHIEF EXECUTIVE  
MANAGER**

**03/22/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date