

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000104943

**Entity Name:** PHASES EVENT HALL LLC

**Current Principal Place of Business:**

2528 W BEAVER STREET  
JACKSONVILLE, FL 32254

**Current Mailing Address:**

2528 W BEAVER STREET  
JACKSONVILLE, FL 32254

**FEI Number:** 85-1363810

**Certificate of Status Desired:** No

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

ZEPHIRIN, JULIO  
2528 W BEAVER STREET  
JACKSONVILLE, FL 32254 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 PR  
Name ZEPHIRIN, JULIO  
Address 2528 W BEAVER STREET  
City-State-Zip: JACKSONVILLE FL 32254

Title AP  
Name ZEPHIRIN, CATHERINE V  
Address 2528 W BEAVER STREET  
City-State-Zip: JACKSONVILLE FL 32254

Title AP  
Name ZEPHIRIN, ALEXANDRA  
Address 2528 W BEAVER STREET  
City-State-Zip: JACKSONVILLE FL 32254

Title AP  
Name ZEPHIRIN, GENEVIEVE A  
Address 203-3 W 48TH STREET  
City-State-Zip: JACKSONVILLE FL 32208

*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:** JULIO ZEPHIRIN

**PRESIDENT**

**02/12/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date