

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000120930

**Entity Name:** PBI WALLIS DISTR. LLC

**Current Principal Place of Business:**

687 OLD WILLETS PATH  
SUITE C  
HAUPPAUGE, NY 11788

**Current Mailing Address:**

687 OLD WILLETS PATH  
SUITE C  
HAUPPAUGE, NY 11788 US

**FEI Number:** 85-1362869

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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            NATIONAL EXCHANGE TITLEHOLDER  
                  1031 CO  
Address        23623 N SCOTTSDALE RD D3250  
City-State-Zip: SCOTTSDALE AZ 85255

*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:** GARY P. KRUPNICK

MEMBER

03/08/2021

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

\_\_\_\_\_ Date