

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000169109

**Entity Name:** ETHNIC GALS LLC

**Current Principal Place of Business:**

16295 NW 14TH ST  
PEMBROKE PINES, FL 33028

**Current Mailing Address:**

16295 NW 14TH ST  
PEMBROKE PINES, FL 33028 US

**FEI Number:** 85-1592415

**Certificate of Status Desired:** No

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

MAMIE, ANTHEA  
16295 NW 14TH ST  
PEMBROKE PINES, FL 33028 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:** ANTHEA MAMIE

01/18/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ANTHEA, MAMIE  
Address 3060 SW 37AV  
702  
City-State-Zip: MIAMI FL 33133

Title MANAGER  
Name CAESAR, JONATHAN BRUCE-  
BRANDON  
Address 16295 NW 14TH ST  
City-State-Zip: PEMBROKE PINES FL 33028

*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:** JONATHAN CAESAR

MANAGER

01/18/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date