

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000126216

**Entity Name:** 535 OAKS DRIVE #110, LLC

**Current Principal Place of Business:**

535 OAKS DRIVE  
#110  
POMPANO BEACH, FL 33060

**Current Mailing Address:**

535 OAKS DRIVE  
#110  
POMPANO BEACH, FL 33060

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

BILU, GEIL S  
7822 NW 44 STREET  
SUNRISE, FL 33351 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 LEVY, CLAUDIA  
Address 535 OAKS DR  
APT 110  
City-State-Zip: POMPANO BEACH FL 33069

Title AMBR  
Name COHEN, RON  
Address 6520 PLATT AVENUE  
355  
City-State-Zip: LOS ANGELES CA 91307

*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:** CLAUDIA LEVY

SEC

02/20/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date