

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000280482

**Entity Name:** HAMSTER LLC

**Current Principal Place of Business:**

3901 S. OCEAN DR #11U  
HOLLYWOOD, FL 33019

**Current Mailing Address:**

3901 S. OCEAN DR #11U  
HOLLYWOOD, FL 33019 US

**FEI Number:** 87-1329040

**Certificate of Status Desired:** No

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

ACCOUNTING MAX SERVICES INC  
6635 W COMMERCIAL BLVD  
STE 103  
TAMARAC, FL 33319 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 MGR  
Name ESPECHE, MARIA MAXIMA  
Address 3901 S. OCEAN DR #11U  
City-State-Zip: HOLLYWOOD FL 33019

Title MGR  
Name MASSACESE, ALBERTO D  
Address 3901 S. OCEAN DR #11U  
City-State-Zip: HOLLYWOOD FL 33019

Title AP  
Name MASSACESE, DANNY  
Address 3901 S. OCEAN DR #11U  
City-State-Zip: HOLLYWOOD FL 33019

Title AP  
Name MASSACESE, IGNACIO  
Address 3901 S. OCEAN DR #11U  
City-State-Zip: HOLLYWOOD FL 33019

Title AP  
Name MASSACESE, MARIA MAXIMA  
Address 3901 S. OCEAN DR #11U  
City-State-Zip: HOLLYWOOD FL 33019

*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:** ESPECHE, MARIA MAXIMA

MGR

04/26/2024

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

\_\_\_\_\_  
Date