## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000287206

**Entity Name: AMIS GROUP LLC** 

**Current Principal Place of Business:** 

980 N. FEDERAL HWY., STE. 110

BOCA RATON, FL 33432

**Current Mailing Address:** 

980 N. FEDERAL HWY.,

STE, 110

BOCA RATON, FL 33432 US

FEI Number: 87-1372437 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRANT LAW CORPORATION, P.A. 1498 SW 5TH AVENUE BOCA RATON, FL 33432 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

**FILED** Apr 22, 2024

**Secretary of State** 

5019122023CC

Authorized Person(s) Detail:

Title **AMBR** Title MGR

IUSUPOVA, MARIIA Name IUSUPOVA, MARIIA Name Address 980 N. FEDERAL HWY., Address 980 N. FEDERAL HWY., STE. 110 FL 33432 City-State-Zip: STE. 110 FL 33432 City-State-Zip:

Title SECRETARY Title **AMBR** 

Name YERMACHONAK, ANTON Name YERMACHONAK, ANTON 600 PARKVIEW DR APT 725 Address 600 PARKVIEW DR APT 725 Address City-State-Zip: HALLANDALE FL 33009 City-State-Zip: HALLANDALE FL 33009

Title **SECRETARY** Title **AMBR** 

Name DVORETSKII, IGOR Name DVORETSKII, IGOR

300 NE 12TH AVE APT 602 Address Address 300 NE 12TH AVE APT 602

City-State-Zip: HALLANDALE BEACH FL 33009 City-State-Zip: HALLANDALE BEACH FL 33009

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.