

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000508044

**Entity Name:** ISLAND TINGS RESTAURANT MIAMI GARDENS, LLC

**Current Principal Place of Business:**

16194 NW 27 AVE.  
MIAMI GARDENS, FL 33054

**Current Mailing Address:**

80 N.E. 168TH STREET  
NORTH MIAMI BEACH, FL 33162

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

JOHNSON, AHMAND R ESQ.  
100 SE 2ND STREET  
3400  
MIAMI, FL 33131 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           | AP                            | Title           | PRESIDENT                  |
| Name            | JOHNSON, AHMAND R ESQ.        | Name            | PRINCE, ELRIC              |
| Address         | 100 SE 2ND STREET, SUITE 3400 | Address         | 80 NE 168TH STREET         |
| City-State-Zip: | MIAMI FL 33131                | City-State-Zip: | NORTH MIAMI BEACH FL 33162 |

*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:** ELRIC PRINCE

**PRESIDENT**

**08/11/2022**

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

\_\_\_\_\_  
Date