

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000240175

**Entity Name:** SHAMAPROMO LLC

**Current Principal Place of Business:**

3934 NW 90 TH AVE  
SUNRISE, 33351

**Current Mailing Address:**

3934 NW 90TH AVE  
SUNRISE, FL 33351 US

**FEI Number:** 87-4135395

**Certificate of Status Desired:** Yes

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

PIERRE, YOURDLYNE D  
3934 NW 90 TH AVE  
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	AR	Title	AMBR
Name	EDOUARD, SENGERLIE F	Name	BIEN-AIME, JEAN J
Address	3934 NW 90 TH AVE	Address	53 JEFFERSON ST
City-State-Zip:	SUNRISE FL 33351	City-State-Zip:	LYNN MA 01901

*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:** SENGERLIE EDOUARD

CEO

04/17/2023

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

\_\_\_\_\_  
Date