

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000341014

**Entity Name:** JAX AFTER DARK LLC

**Current Principal Place of Business:**

10960 BEACH BLVD  
LOT 488  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

10960 BEACH BLVD  
LOT 488  
JACKSONVILLE, FL 32246 US

**FEI Number:** 35-2770635

**Certificate of Status Desired:** No

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

ALQALAM, SHADI  
2550 MAYPORT RD  
UNIT 6  
JACKSONVILLE, FL 32233 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 ALQALAM, SHADI MGR  
Address 2550 MAYPORT RD UNIT 6  
City-State-Zip: JACKSONVILLE FL 32233

Title MGR  
Name BLANCO, GABRIEL MGR  
Address 10960 BEACH BLVD LOT 488  
City-State-Zip: JACKSONVILLE FL 32246

*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:** SHADI ALQALAM

MGR

01/30/2023

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

\_\_\_\_\_  
Date