

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000480709

**Entity Name:** THE CAKE CREATORS WAY LLC

**Current Principal Place of Business:**

19046 BRUCE B. DOWNS BLVD.  
# 1087  
TAMPA, FL 33647

**Current Mailing Address:**

19046 BRUCE B. DOWNS BLVD.  
# 1087  
TAMPA, FL 33647

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

ANTIGHA, ITAM  
4142 CHEVAL BLVD  
LUTZ, FL 33558 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	AMBR	Title	MGR
Name	ANTIGHA, XAJAY	Name	ANTIGHA, ITAM
Address	19046 BRUCE B. DOWNS BLVD. # 1087	Address	19046 BRUCE B. DOWNS BLVD. # 1087
City-State-Zip:	TAMPA FL 33647	City-State-Zip:	TAMPA FL 33647

*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:** XAJAY ANTIGHA

AMBR

04/03/2024

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

\_\_\_\_\_  
Date