

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000519844

**Entity Name:** EWOK27 LLC

**Current Principal Place of Business:**

345 OCEAN DRIVE, APT 801  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

350 COLLINS AVE  
104  
MIAMI BEACH, FL 33139 US

**FEI Number:** 92-1121060

**Certificate of Status Desired:** No

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

GRECO, LILLIAN  
350 COLLINS AVENUE, APT 104  
MIAMI BEACH, FL 33139 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  
Name            LILLIAN GRECO  
Address        345 OCEAN DRIVE, APT 801  
City-State-Zip: MIAMI BEACH FL 33139

Title            AMBR  
Name            PAUL GRECO  
Address        345 OCEAN DRIVE, APT 801  
City-State-Zip: MIAMI BEACH FL 33139

*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:** LILLIAN GRECO

AMBR

03/07/2024

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

\_\_\_\_\_  
Date