

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000010149

**Entity Name:** MAPSIC, LLC

**Current Principal Place of Business:**

19111 COLLINS AVE  
2005  
SUNNY ISLES, FL 33160

**Current Mailing Address:**

19111 COLLINS AVE  
2005  
SUNNY ISLES, FL 33160 US

**FEI Number:** 92-1542948

**Certificate of Status Desired:** Yes

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

HANNA ZAKI & COMPANY  
7900 OAK LANE  
482  
MIAMI LAKES, FL 33016 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 SADEK, PETER  
Address 19111 COLLINS AVE  
2005  
City-State-Zip: SUNNY ISLES FL 33160

Title MGR  
Name SADEK, ANDREW  
Address 19111 COLLINS AVE  
2005  
City-State-Zip: SUNNY ISLES FL 33160

Title MGR  
Name MOUSSA-SADEK, MADELEINE  
Address 19111 COLLINS AVE  
2005  
City-State-Zip: SUNNY ISLES FL 33160

*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:** PETER SADEK

**DIRECTOR**

**04/29/2024**

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

\_\_\_\_\_  
Date