

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000532687

Entity Name: MY VAPES STORES LLC

Current Principal Place of Business:

927 FERN STREET
1000
ALTAMONTE SPRING, FL 32701

Current Mailing Address:

927 FERN STREET
1000
ALTAMONTE SPRING, FL 32701

FEI Number: 93-4870070

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BASHIR, AFZAL
927 FERN STREET
1000
ALTAMONTE SPRING, FL 32701 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 BASHIR, AFZAL
Address 927 FERN STREET SUITE # 1000
City-State-Zip: ALTAMONTE SPRING FL 32701

Title AMBR
Name RASHID, OMAR S
Address 927 FERN STREET SUITE # 1000
City-State-Zip: ALTAMONTE SPRING FL 32701

Title AMBR
Name PEREIRA, BARON
Address 927 FERN STREET SUITE # 1000
City-State-Zip: ALTAMONTE SPRING FL 32701

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: AFZAL BASHIR

AMBR

04/18/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date