

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000006003

**Entity Name:** CBFS HOSPITALITY, LLC

**Current Principal Place of Business:**

220 W. 7TH AVE.  
SUITE 110  
TAMPA, FL 33602

**Current Mailing Address:**

220 W. 7TH AVE.  
SUITE 110  
TAMPA, FL 33602

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

KOCHE, DAVID L  
601 BAYSHORE BLVD.  
SUITE 700  
TAMPA, FL 33606 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

**Officer/Director Detail :**

Title            AMBR  
Name            SCALFARO, FRANK  
Address        220 W 7TH AVE  
                  SUITE 110  
City-State-Zip: TAMPA FL 33602

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** FRANK SCALFARO

AMBR

04/07/2023

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date