## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000034763

Entity Name: COMPREHENSIVE BUSINESS SYSTEMS LLC

**FILED** Mar 26, 2025 **Secretary of State** 0597489178CC

## **Current Principal Place of Business:**

4801 SOUTH UNIVERSITY DRIVE SUITE 128

DAVIE, FL 33328

## **Current Mailing Address:**

4801 SOUTH UNIVERSITY DRIVE SUITE 128

DAVIE, FL 33328 US

FEI Number: 42-1576046 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

HILL, STUART B 11400 SW 23RD PLACE DAVIE, FL 33325 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 **MGRM** Title **PRESIDENT** 

COMPREHENSIVE BUSINESS HILL, STUART B Name Name

SYSTEMS, INC Address 4801 SOUTH UNIVERSITY DRIVE, 4801 SOUTH UNIVERSITY DRIVE, Address #128

#128 DAVIE FL 33328 City-State-Zip: City-State-Zip: DAVIE FL 33328

VΡ Title

SCHAUBEN, MARC A Name

Address 4801 SOUTH UNIVERSITY DRIVE,

#128

City-State-Zip: DAVIE FL 33328

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.

03/26/2025 SIGNATURE: STUART B HILL **PRESIDENT**