

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000075103

Entity Name: FULL-SCALE DISTRIBUTORS, LLC

Current Principal Place of Business:

500 NE 29 ST
908
MIAMI, FL 33137

Current Mailing Address:

500 NE 29 ST
908
MIAMI, FL 33137 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WONG, EDWARD L
500 NE 29 ST
908
MIAMI, FL 33137 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 WONG, EDWARD L
Address 500 NE 29 ST
908
City-State-Zip: MIAMI FL 33137

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: EDWARD WONG

MANAGING MEMBER

04/26/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date