

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000062260

**Entity Name:** BEST ROOFING SERVICES LLC**Current Principal Place of Business:**1600 NE 12TH TERRACE  
FORT LAUDERDALE, FL 33305**Current Mailing Address:**1600 NE 12TH TERRACE  
FORT LAUDERDALE, FL 33305 US**FEI Number:** 45-2411210**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**DA FONSECA, ANTHONY W. ESQ  
1600 NE 12TH TERRACE  
FORT LAUDERDALE, FL 33305 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:** ANTHONY W. DA FONSECA

04/29/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	CEO
Name	TIKRITI, SAM
Address	1600 NE 12TH TERRACE
City-State-Zip:	FORT LAUDERDALE FL 33305

Title	CFO
Name	VASSALL, DAMIEN
Address	1600 NE 12TH TERRACE
City-State-Zip:	FORT LAUDERDALE FL 33305

Title	GENERAL COUNSEL
Name	DA FONSECA, ANTHONY WILLIAM ESQ.
Address	1600 NE 12TH TERRACE
City-State-Zip:	FORT LAUDERDALE FL 33305

Title	AMBR
Name	HARKNESS HURRICANE INTERMEDIATE HOLDINGS, INC.
Address	475 5 AVE 20 FL
City-State-Zip:	NEW YORK NY 10017

*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:** LEESA THOMPSON**EXECUTIVE ASSISTANT  
TO CEO & CFO**

04/29/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date