### 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000039405

Entity Name: TRUVAPES, LLC

FILED
Apr 23, 2014
Secretary of State
CC9149054155

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

21365 CYRPESS HAMMOCK DR.

20 J

BOCA RATON, FL 33428

# **Current Mailing Address:**

21365 CYRPESS HAMMOCK DR.

20 J

BOCA RATON, FL 33428

FEI Number: 45-4866400 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

REPPAS, MICHAEL ESQ 7850 NW 146TH STREET SUITE 501 MIAMI LAKES, FL 33016 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 PANAY, CONSTANTINE

Address 21365 CYPRESS HAMMOCK DR. #20J

City-State-Zip: BOCA RATON FL 33428

SIGNATURE: CONSTANTINE PANAY

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.

**MGR** 

Electronic Signature of Signing Authorized Person(s) Detail

04/23/2014

Date