

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000057640

Entity Name: TOP OF THE LINE MANAGEMENT, LLC**Current Principal Place of Business:**4431 SW 64TH AVENUE
SUITE # 115
DAVIE, FL 33314**Current Mailing Address:**C/O TOP OF THE LINE MANAGEMENT, LLC
4431 SW 64TH SUITE 115
DAVIE, FL 33314 US**FEI Number:** 46-1747691**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TOP OF THE LINE MANAGEMENT, LLC
C/O TOP OF THE LINE MANAGEMENT, LLC
4431 SW 64TH SUITE 115
DAVIE, FL 33314 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:** PANAGIOTA LAZAROU-AMANNA

04/30/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	AUTHORIZED MEMBER
Name	LAZAROU-AMANNA, PANAGIOTA K
Address	C/O AMANNA 5030 SW 109TH AVENUE
City-State-Zip:	DAVIE FL 33328

Title	MBR
Name	ROCHELLE, MATZA S
Address	20020 NE 21ST AVENUE
City-State-Zip:	MIAMI FL 33179

Title	MANAGER, AUTHORIZED REPRESENTATIVE
Name	FLASH FORWARD DEVELOPMENT, LLC
Address	C/O AMANNA 5030 SW 109TH AVENUE
City-State-Zip:	DAVIE FL 33328

Title	AUTHORIZED REPRESENTATIVE
Name	AMANNA, MARIA
Address	C/O AMANNA 5030 SW 109TH AVENUE
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.

SIGNATURE: PANAGIOTA LAZAROU AMANNA

MANAGER

04/30/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date