

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000051450

**Entity Name:** YOUR MEETING PLACE LLC

**Current Principal Place of Business:**

2145 NE 207TH STREET  
MIAMI, FL 33179

**Current Mailing Address:**

2145 N.E. 207TH STREET  
MIAMI, FL 33179 US

**FEI Number:** 46-3798471

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SCHANERMAN, BARI S  
2145 N.E. 207TH STREET  
MIAMI, FL 33179 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            PRESIDENT  
Name            SCHANERMAN, BARI S.  
Address        2145 N.E. 207TH STREET  
City-State-Zip: MIAMI FL 33179

*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:** BARI SCHANERMAN

**OWNER**

**01/19/2025**

Electronic Signature of Signing Authorized Person(s) Detail

Date