

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000010190

Entity Name: FOREIGN LIFE STYLE ENTERTAINMENT**Current Principal Place of Business:**15940 NE 19TH CT
#4
NORTH MIAMI BEACH, FL 33162**Current Mailing Address:**15940 NE 19TH CT
#4
NORTH MIAMI BEACH, FL 33162 US**FEI Number:** 47-1552128**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ALEXIS, MACKENDLY
15940 NE 19TH CT
#4
NORTH MIAMI BEACH, FL 33162 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:** MACKENDLY ALEXIS

02/21/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title COO
Name ALEXIS, MACKENDLY
Address 15940 NE 19TH CT
4
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title CEO
Name PEPE, STEVE
Address 15940 NE 19TH CT
#4
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title VC
Name DESTIN, NEIL
Address 15940 NE 19TH CT
#4
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title PRESIDENT
Name ST.VILL, CLAUDETT
Address 15940 NE 19TH CT
4
City-State-Zip: NORTH MIAMI BEACH FL 33136

Title VP
Name BENONY, YVAN
Address 15940 NE 19TH CT
#4
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title CHAIRMAN
Name COLLINS, SHANAY
Address 15940 NE 19TH CT
#4
City-State-Zip: NORTH MIAMI BEACH FL 33162

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: MACKENDLY ALEXIS

COO

02/21/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date