

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000103493

**Entity Name:** A WANDA-FUL STITCH, LLC

**Current Principal Place of Business:**

5655 SW 192ND TERRACE  
SOUTHWEST RANCHES, FL 33332

**Current Mailing Address:**

5655 SW 192ND TERRACE  
SOUTHWEST RANCHES, FL 33332 US

**FEI Number:** 47-1231904

**Certificate of Status Desired:** No

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

ROBINS, CORY ESQ,  
3876 SHERIDAN STREET  
HOLLYWOOD, FL 33021 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            AMBR  
Name            RIVERA, WANDA  
Address        5655 SW 192ND TERRACE  
City-State-Zip: SOUTHWEST RANCHES FL 33332

*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:** WANDA RIVERA

AMBR

03/31/2017

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date