## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000156400

Entity Name: VAFRANKFURT, LLC

**Current Principal Place of Business:** 

Current Frincipal Flace of Busi

19443 40 COURT

SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:** 

C/O IWPS

P.O. BOX 830726 MIAMI, FL 33283 US

FEI Number: APPLIED FOR Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C.A. CORPORATE SERVICES, INC. 7101 SW 112 PLACE MIAMI, FL 33173 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 AR Title MANAGER

Name INTERNATIONAL WEALTH PLANNING Name IHNS, RUDOLPH

SOLUTIONSLLC Address 19443 40 COURT

Address C/O IWPS

P.O. BOX 830726 City-State-Zip: SUNNY ISLES BEACH FL 33160

City-State-Zip: MIAMI FL 33283

Title MANAGER

Name DE OLIVEIRA BELLO P., VALERIA

Address 19443 40 COURT

City-State-Zip: SUNNY ISLES BEACH FL 33160

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: OCTAVIO MESTRE AR 06/30/2020

FILED Jun 30, 2020

**Secretary of State** 

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