

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000184092

Entity Name: THE TROPHY W/MAN LLC

Current Principal Place of Business:

6843 COLLEGE CT
DAVIE, FL 33317

Current Mailing Address:

6843 COLLEGE CT
DAVIE, FLORIDA 33317 UN

FEI Number: 47-2431333

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARRAQUE, MARIA E
6843 COLLEGE CT
DAVIE, FL 33317 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 MGR
Name BARRAQUE, MARIA E
Address 6843 COLLEGE CT
City-State-Zip: DAVIE FLORIDA 33317

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: MARIA BARRAQUE

OWNER

04/22/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date