

**2021 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L14000192535

**Entity Name:** GINNYBAKES LLC

**Current Principal Place of Business:**

4396 PINE TREE DR  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

4396 PINE TREE DR  
MIAMI BEACH, FL 33140 US

**FEI Number:** 36-0619132

**Certificate of Status Desired:** No

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

STERN, JEFFREY  
4396 PINE TREE DR  
MIAMI BEACH, FL 33140 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:** JEFFREY STERN

05/24/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title VP, DIRECTOR, CHAIRMAN  
Name STERN, JEFFREY  
Address 4396 PINE TREE DR  
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR, CHAIRMAN  
Name GREENBERG, DAN  
Address PO BOX 402486  
City-State-Zip: MIAMI FL 33140

Title PRESIDENT, CEO, DIRECTOR  
Name STERN, DANIELLA  
Address 4396 PINE TREE DR  
City-State-Zip: MIAMI BEACH FL 33140

Title COO, DIRECTOR, TREASURER  
Name STERN, ZACHARY  
Address 4396 PINE TREE DR  
City-State-Zip: MIAMI BEACH FL 33140

Title VC, DIRECTOR  
Name STERN, EDWARD  
Address PO BOX 402486  
City-State-Zip: MIAMI FL 33140

Title CHAIRMAN, CMO  
Name MAZZUCHELLI, ROBERT  
Address PO BOX 402486  
City-State-Zip: MIAMI FL 33140

*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:** JEFFREY STERN

VP

05/24/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date