

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000039502

**Entity Name:** TCMZ LLC

**Current Principal Place of Business:**

520 MIDDLE RIVER DR.  
FORT LAUDERDALE, FL 33304

**Current Mailing Address:**

79 S.W. 12TH STREET  
SUITE 1806  
MIAMI, FL 33130 US

**FEI Number:** 81-2396659

**Certificate of Status Desired:** No

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

BRIAN A. OLIVER PLLC  
79 S.W. 12TH STREET  
SUITE 1806  
MIAMI, FL 33130 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:** BRIAN OLIVER

05/01/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name CHERIF, TARIQ S  
Address 520 MIDDLE RIVER DR.  
City-State-Zip: FORT LAUDERDALE FL 33304

Title MGR  
Name ZINGLER, MATTHEW B  
Address 555 OAKS LANE. BUILDING 67, APT  
#401  
City-State-Zip: POMPANO BEACH FL 33069

*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:** TARIQ CHERIF

MGR

05/01/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date