

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000032845

**Entity Name:** UNIVERSITY BARBER SHOP LLC

**Current Principal Place of Business:**

8511 NW 82ND STREET  
TAMARAC, FL 33321

**Current Mailing Address:**

8511 NW 82ND STREET  
TAMARAC, FL 33321 US

**FEI Number: 81-5381643**

**Certificate of Status Desired: No**

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

SCOPPETTA, FERNANDO  
6722 N UNIVERSITY DR  
TAMARAC, FL 33321 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 SCOPPETTA, FERNANDO  
Address 8511 NW 82ND STREET  
City-State-Zip: TAMARAC FL 33321

Title MGR  
Name VILLALOBOS, CHRISTOPHER  
Address 1703 NW 65TH TERRACE  
City-State-Zip: MARGATE FL 33063

*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: CHRISTOPHER VILLALOBOS**

**OWNER**

**02/22/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date