

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000008939

FILED
Apr 22, 2019
Secretary of State
1869812957CC

Entity Name: CARIBBEAN SCRATCH OFF TICKET GROUP LLC

Current Principal Place of Business:

4101 SW 139TH AVENUE
MIRAMAR, FL 33027

Current Mailing Address:

4101 SW 139TH AVENUE
MIRAMAR, FL 33027

FEI Number: 82-5257139

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

URBAN PULSE DIRECT LLC
14900 SW 30TH ST
#278692
MIRAMAR, FL 33027 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 AUTHORIZED MEMBER
Name WALKINE, JAMES
Address 4101 SW 139TH AVENUE
City-State-Zip: MIRAMAR FL 33027

Title AUTHORIZED MEMBER
Name SMITH, DEHYN
Address 4101 SW 139TH AVENUE
City-State-Zip: MIRAMAR FL 33027

Title AUTHORIZED REPRESENTATIVE
Name URBAN PULSE DIRECT LLC
Address 14900 SW 30TH ST
#278692
City-State-Zip: MIRAMAR FL 33027

Title AUTHORIZED MEMBER
Name BYNES, JUSTIN
Address 2631 NW 8TH COURT
APT. 4
City-State-Zip: FORT LAUDERDALE FL 33311

Title AUTHORIZED MEMBER
Name NELSON, ROBERT E JR.
Address 2631 NW 8TH COURT
APT. 4
City-State-Zip: FORT LAUDERDALE FL 33311

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: STACEY CLARKE

**AUTHORIZED
REPRESENTATIVE**

04/22/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date