#### 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. 02/02/2021

OWNER

SIGNATURE: ROBERT GARRETT

Electronic Signature of Signing Authorized Person(s) Detail

Name and Address of Current Registered Agent: GARRETT, ROBERT B 666 N FEDERAL HWY FORT LAUDERDALE, FL 33315 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: ROBERT GARRETT

Electronic Signature of Registered Agent

#### Authorized Person(s) Detail :

Title MGR Name GARRETT, ROBERT B Address 666 N FEDERAL HWY

City-State-Zip: FORT LAUDERDALE FL 33315

Secretary of State 5611456767CC

FILED Feb 02, 2021

Certificate of Status Desired: No

02/02/2021 Date

Date

# 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L18000073942

Entity Name: POINT BREAK POKE HOUSE FRANCHISING LLC

## **Current Principal Place of Business:**

666 N FEDERAL HWY FORT LAUDERDALE. FL 33315

## **Current Mailing Address:**

666 N FEDERAL HWY FORT LAUDERDALE, FL 33315 US

## FEI Number: 82-4965758