

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000107359

**Entity Name:** GJ INKA PROPERTIES LLC.

**Current Principal Place of Business:**

4149 SW 47TH AVE  
SUITE 1A  
DAVIE, FL 33314

**Current Mailing Address:**

4149 SW 47TH AVE  
SUITE 1A  
DAVIE, FL 33314 US

**FEI Number:** 30-1113396

**Certificate of Status Desired:** No

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

GJ UPHOLSTERY MASTERS INC.  
4149 SW 47TH AVE  
SUITE 1A  
DAVIE, FL 33314 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 AMBR  
Name GJ UPHOLSTERY MASTERS INC.  
Address 4149 SW 47TH AVE  
SUITE 1A  
City-State-Zip: DAVIE FL 33314

Title MGR  
Name URE, JAIME SR.  
Address 10750 SW 14TH CT  
City-State-Zip: DAVIE FL 33324

Title MGR  
Name URE, GLORIA I  
Address 10750 SW 14TH CT  
City-State-Zip: DAVIE FL 33324

*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:** JAIME URE

**MANAGER**

**04/29/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date