

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000243282

Entity Name: 4COREBIZ LLC

Current Principal Place of Business:

13692 CROSSPOINTE DR
WEST PALM BEACH, FL 33418

Current Mailing Address:

PO BOX 8141
CORAL SPRINGS, FL 33075

FEI Number: 83-2181581

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GROPMAN, ALAN S
13692 CROSSPOINTE DR
WEST PALM BEACH, FL 33418 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 MBR
Name GROPMAN, ALAN S
Address 13692 CROSSPOINTE DR
City-State-Zip: WEST PALM BEACH FL 33418

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: GROPMAN , ALAN S

MBR

04/17/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date