## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000280123

Entity Name: INFELD BARR REISKIND CPA'S LLC

**Current Principal Place of Business:** 

5011 S STATE ROAD 7 107

DAVIE, FL 33314

## **Current Mailing Address:**

5011 S STATE ROAD 7 107 DAVIE, FL 33314

FEI Number: 83-2762292 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

REISKIND, STEVEN 5011 S STATE ROAD 7 107 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: STEVEN REISKIND 03/04/2024

Electronic Signature of Registered Agent Date

## Authorized Person(s) Detail:

Title MANAGER

Name REISKIND, STEVEN
Address 5011 S STATE ROAD 7

107

City-State-Zip: DAVIE FL 33314

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: STEVEN REISKIND MANAGER 03/04/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Mar 04, 2024

**Secretary of State** 

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