

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000268051

Entity Name: 4913 LAUREL ST LLC

Current Principal Place of Business:

4913 W LAUREL ST
TAMPA, FL 33607

Current Mailing Address:

4010 W STATE ST
TAMPA, FL 33609

FEI Number: 84-3483402

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KAVOUKLIS, NICHOLAS M DMD
4010 W STATE ST
TAMPA, FL 33609 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 MGR
Name KAVOUKLIS, NICHOLAS M DMD
Address 4010 W STATE ST
City-State-Zip: TAMPA FL 33609

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: KAVOUKLIS , NICHOLAS M , DMD

MGR

06/11/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date