

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000015208

Entity Name: MAGIC CITY PROPS, LLC**Current Principal Place of Business:**20855 NE 16TH AVENUE
C34
MIAMI, FL 33179**Current Mailing Address:**1056 NE 202 LANE
MIAMI, FL 33179 US**FEI Number:** 84-4558334**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GIGLIOTTI, LISA
1056 NE 202 LANE
MIAMI, FL 33179 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	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
Name	BARRACLOUGH, JULIUS A	Name	GIGLIOTTI, LISA N
Address	1056 NE 202 LANE	Address	1056 NE 202 LANE
City-State-Zip:	MIAMI FL 33179	City-State-Zip:	MIAMI FL 33179

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: LISA GIGLIOTTI

PVST

04/26/2022

Electronic Signature of Signing Authorized Person(s) Detail_____
Date