

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000071221

**Entity Name:** WAPWAPPAPPAP LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

10943 NAPLES CT N  
JACKSONVILLE, FL 32218

**Current Mailing Address:**

2653 S DECATUR BLVD  
1017  
LAS VEGAS, NV 89102 US

**FEI Number:** 85-1012883

**Certificate of Status Desired:** No

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

LAMBHEY, LUANIE E  
10943 NAPLES CT N  
JACKSONVILLE, FL 32218 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            PRESIDENT  
Name            WILSON, DOMINIQUE D  
Address        3613 PERCHING BIRD LANE  
City-State-Zip: NORTH LAS VEGAS NV 89084

Title            CEO  
Name            LAMBHEY, LUANIE ECIEN SR.  
Address        10943 NAPLES CT N  
City-State-Zip: JACKSONVILLE FL 32218

*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:** LUANIE LAMBHEY

CEO

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date