

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000272093

**Entity Name:** GLOBAL GOURMET MARKETS, LLC**Current Principal Place of Business:**1400 NW 116TH AVE  
PLANTATION, FL 33027**Current Mailing Address:**1400 NW 116TH AVE  
PLANTATION, FL 33027 US**FEI Number: 85-4019381****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**FERNANDO M. SOCOL, PA  
3350 SW 148TH AVE.  
STE 134  
MIRAMAR, FL 33027 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                 | Title           | MGR                 |
| Name            | HERBERT, LINETTY G  | Name            | SOCOL, ALICIA C     |
| Address         | 1400 NW 116TH AVE   | Address         | 1400 NW 116TH AVE   |
| City-State-Zip: | PLANTATION FL 33323 | City-State-Zip: | PLANTATION FL 33323 |
| Title           | MGR                 | Title           | MGR                 |
| Name            | HASMIN, YANI        | Name            | FERNANDEZ, GIPSY    |
| Address         | 1400 NW 116TH AVE   | Address         | 1400 NW 116TH AVE   |
| City-State-Zip: | PLANTATION FL 33323 | City-State-Zip: | PLANTATION FL 33323 |

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: ALICIA C SOCOL****MANAGER****03/14/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date