

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000357815

Entity Name: FRIENDS BUSINESS ENTERPRISE FIVE LLC**Current Principal Place of Business:**14928 S TAMiami TRAIL
NORTH PORT, FL 34287**Current Mailing Address:**PO BOX 984
OLDSMAR, FL 34677 UN**FEI Number:** 85-4027747**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ALI, ASRAF R
4961 CROSS POINTE DRIVE
OLDSMAR, FL 34677 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 | ROWZANI, YASEEN M |
| Address | 4961 CROSS POINTE DRIVE |
| City-State-Zip: | OLDSMAR FL 34677 |

| | |
|-----------------|-------------------------|
| Title | MGR |
| Name | ALI, ASRAF R |
| Address | 4961 CROSS POINTE DRIVE |
| City-State-Zip: | OLDSMAR FL 34677 |

| | |
|-----------------|-------------------------|
| Title | AMBR |
| Name | ROWZANI, SANA M |
| Address | 4961 CROSS POINTE DRIVE |
| City-State-Zip: | OLDSMAR FL 34677 |

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: ASRAF R ALI

MGR

02/06/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date