

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000380326

**Entity Name:** VIZE CITY KUSTOMS LLC

**Current Principal Place of Business:**

10400 W STATE ROAD 84  
UNIT 103  
DAVIE, FL 33324

**Current Mailing Address:**

10400 W STATE ROAD 84  
UNIT 103  
DAVIE, FL 33324

**FEI Number:** 85-4260560

**Certificate of Status Desired:** No

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

FALERO, RICHARD  
10400 W STATE ROAD 84  
SUITE 103  
DAVIE, FL 33324 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 AMBR  
Name FALERO, RICHARD  
Address 10400 W STATE ROAD 84 UNIT 103  
City-State-Zip: DAVIE FL 33324

*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:** RICHARD FALERO

AMBR

04/20/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date