

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000264374

**Entity Name:** MAGNA SUSHI LLC

**Current Principal Place of Business:**

1691 MICHIGAN AVENUE  
STE 115A  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

1691 MICHIGAN AVENUE  
STE 115A  
MIAMI BEACH, FL 33139

**FEI Number:** 87-1087629

**Certificate of Status Desired:** No

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

MANCINI, VALTER  
1756 N BAYSHORE DR  
APT 12B  
MIAMI, FL 33132 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            | MANCINI, VALTER               | Name            | MAGNANI, ADRIANO                 |
| Address         | 1756 N BAYSHORE DR<br>APT 12B | Address         | 1337 EUCLID AVE<br>APT 101       |
| City-State-Zip: | MIAMI FL 33132                | City-State-Zip: | MIAMI BEACH FL 33139             |
| Title           | MGR                           | Title           | MGR                              |
| Name            | VOLPE, ERIC RANIERI           | Name            | PINTO , STEFANO                  |
| Address         | 1553 MERIDIAN AVE<br>APT 104  | Address         | 1691 MICHIGAN AVENUE<br>STE 115A |
| City-State-Zip: | MIAMI BEACH FL 33139          | City-State-Zip: | MIAMI BEACH FL 33139             |

*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:** VALTER MANCINI

MGR

04/14/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date