

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000293426

**Entity Name:** 535 SMOKE SHOP LLC

**Current Principal Place of Business:**

8216 WORLD CENTER DRIVE SUITE D  
ORLANDO, FL 32821

**Current Mailing Address:**

5038 W IRLO BRONSON MEMORIAL HWY  
KISSIMMEE,, FL 34746 US

**FEI Number:** 87-2235778

**Certificate of Status Desired:** No

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

RAGRAGUI, SAID  
8216 WORLD CENTER DRIVE SUITE D  
ORLANDO, FL 32821 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 RAGRAGUI, SAID  
Address 9179 OUTLOOK ROCK TRAIL  
City-State-Zip: WINDERMERE FL 34786

Title MGR  
Name GAMRAOUI, YOUSSEF  
Address 1007 BLACK WILLOW DRIVE  
City-State-Zip: OVIEDO FL 32765

Title MGR  
Name ELMOUHTADI, ABDELFATA  
Address 9915 VISTA HOLLY ROAD  
# 110  
City-State-Zip: ORLANDO FL 32836

Title MGR  
Name ELKOHLI, LAHOUCINE  
Address 5038 W IRLO BRONSON MEMORIAL  
HWY  
City-State-Zip: KISSIMMEE, FL 34746

*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:** YOUSSEF GAMRAOUI

MGR

05/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date