

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000128786

**Entity Name:** STUNNING EVENTS LLC

**Current Principal Place of Business:**

5379 LYONS RD  
#1801  
COCONUT CREEK, FL 33073

**Current Mailing Address:**

5379 LYONS RD  
#1801  
COCONUT CREEK, FL 33073 US

**FEI Number:** 92-1751319

**Certificate of Status Desired:** No

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

MADEIRA, NATALEE  
6865 NW 28 ST  
MARGATE, FL 33063 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 MADEIRA, NATALEE  
Address 6865 NW 28TH ST  
City-State-Zip: MARGATE FL 33063

Title AMBR  
Name MADEIRA, JAIR  
Address 6865 NW 28TH ST.  
City-State-Zip: MARGATE FL 33063

*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:** NATALEE MADEIRA

MGR

04/14/2025

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date