

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000180849

**Entity Name:** FWD SUPREME LLC

**Current Principal Place of Business:**

5350 BRIDGE ST.  
APT1511  
TAMPA , FL 33611

**Current Mailing Address:**

5350 BRIDGE ST.  
APT 1511  
TAMPA, FL 33611 UN

**FEI Number:** 88-2113109

**Certificate of Status Desired:** No

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

BREAULT, NICHOLAS J  
5350 BRIDGE ST.  
APT1511  
TAMPA , FL 33611 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	BREAULT, NICHOLAS J	Name	VALDANT, SEVERINE B
Address	5350 BRIDGE ST. APT1511	Address	5350 BRIDGE ST. APT1511
City-State-Zip:	TAMPA FL 33611	City-State-Zip:	TAMPA FL 33611

*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:** NICHOLAS BREAULT

MGR

01/30/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date