**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**
**Apr 30, 2025**
**Secretary of State**
**3673110046CC**

DOCUMENT# L23000414843

**Entity Name:** COMPLEX SUPPLY, LLC

**Current Principal Place of Business:**

2442 VISCOUNT ROW
ORLANDO, FL 32809

**Current Mailing Address:**

2442 VISCOUNT ROW
ORLANDO, FL 32809 US

**FEI Number: 93-3312359**

**Certificate of Status Desired:** No

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

YACOUB, AMER M
1966 ALTAVISTA CIRCLE
LAKELAND, FL 33810 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: AMER YACOUB 04/30/2025

Electronic Signature of Registered Agent — Date

**Authorized Person(s) Detail :**

| | |
|---|---|
| Title | AMBR |
| Name | YACOUB, AMER M |
| Address | 1966 ALTAVISTA CIRCLE |
| City-State-Zip: | LAKELAND FL 33810 |

| | |
|---|---|
| Title | AMBR |
| Name | YACOUB, JUMA A |
| Address | 1966 ALTAVISTA CIRCLE |
| City-State-Zip: | LAKELAND FL 33810 |

| | |
|---|---|
| Title | AMBR |
| Name | ASKER, ALADIN |
| Address | 2148 TURNING HICKORY CT |
| City-State-Zip: | ORLANDO FL 32835 |

| | |
|---|---|
| Title | AMBR |
| Name | ASKER, ABED |
| Address | 2148 TURNING HICKORY CT |
| City-State-Zip: | ORLANDO FL 32835 |

| | |
|---|---|
| Title | AMBR |
| Name | ASKER, ARAFAT |
| Address | 2426 VISCOUNT ROW |
| City-State-Zip: | ORLANDO FL 32809 |

| | |
|---|---|
| Title | AMBR |
| Name | OTHMAN, OTHMAN |
| Address | PO BOX 79519 |
| City-State-Zip: | CAROLINA OC 00984 |

| | |
|---|---|
| Title | AMBR |
| Name | YACOUB, ZUHAIR |
| Address | 30464 SUNLAND CT |
| City-State-Zip: | WESLEY CHAPEL FL 33543 |

*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: AMER YACOUB AMBR 04/30/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date