

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000061226

Entity Name: TASTE OF THE WEST INDIES LLC

Current Principal Place of Business:

5079 NORTH DIXIE HWY, 125
OAKLAND PARK, FL 33334

Current Mailing Address:

5079 NORTH DIXIE HWY, 125
OAKLAND PARK, FL 33334 US

FEI Number: 93-3496914

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MICHEL-ALOUIDOR, SHELA
4270 NW 21 AVE #2
FORT LAUDERDALE, FL 33309 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 MICHEL-ALOUIDOR, SHELA
Address 4270 NW 21 AVE #2
City-State-Zip: FORT LAUDERDAL FL 33309

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: SHELA MICHEL-ALOUIDOR

OWNER

04/29/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date