## 2024 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A2300000163

Entity Name: KAPLAN GITRON FAMILY LIMITED LIABILITY LIMITED

**PARTNERSHIP** 

## **Current Principal Place of Business:**

2600 S DOUGLAS ROAD **SUITE 1008** CORAL GABLES, FL 33134

## **Current Mailing Address:**

2600 S DOUGLAS ROAD **SUITE 1008** CORAL GABLES, FL 33134 US

FEI Number: 93-3849587 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

TOLLEY, RACHEL 2600 S DOUGLAS ROAD **SUITE 1008** CORAL GABLES, FL 33134 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:

Date Electronic Signature of Registered Agent

**General Partner Detail:** 

Document # Document #

KAPLAN, JAVIER TRUSTEE GITRON BEER, MARIANA TRUSTEE Name Name

3951 194TH TRAIL Address Address 3951 194TH TRAIL

SUNNY ISLES BEACH FL 33160 City-State-Zip: SUNNY ISLES BEACH FL 33160 City-State-Zip:

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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

02/04/2024 SIGNATURE: JAVIER KAPLAN TRUSTEE

**FILED** Feb 04, 2024

**Secretary of State** 

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