

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000027501

**Entity Name:** 123 NORTH KROME LLC

**Current Principal Place of Business:**

123 NORTH KROME AVE  
HOMESTEAD, FL 33030

**Current Mailing Address:**

18490 SW 280 STREET  
HOMESTEAD, FL 33031 US

**FEI Number:** 41-2064678

**Certificate of Status Desired:** No

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

THE DAVA LIVING TRUST  
18490 SW 280 STREET  
HOMESTEAD,, FL 33031 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 MGRM  
Name THE DAVA LIVING TRUST  
Address 18490 SW 280 STREET  
City-State-Zip: HOMESTEAD FL 33031

Title MGR  
Name IAN, IGLESIAS  
Address 18490 SW 280 STREET  
City-State-Zip: HOMESTEAD FL 33031

*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:** IAN IGLESIAS

**MANAGER**

**01/08/2014**

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

\_\_\_\_\_  
Date