

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000012717

Entity Name: MAJESTIC PLAZA SHOPPING CENTER, LLC**Current Principal Place of Business:**1355 E 44TH PL, 100 OFFICE
HIALEAH, FL 33012**Current Mailing Address:**1355 E 44TH PL, 100 OFFICE
HIALEAH, FL 33012**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SMITH, GARY VESQUIRE
1230 NW 7 STREET
MIAMI, FL 33125 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	MANAGER, AUTHORIZED MEMBER
Name	HAYUN, AMIR	Name	RUSSO, ALBERT
Address	1355 W 44 PL	Address	1355 W 44TH PL # 100 OFFICE
City-State-Zip:	HIALEAH FL 3301 FL 33012	City-State-Zip:	HIALEAH FL 33012
Title	AUTHORIZED MEMBER, MANAGER	Title	MANAGER, AUTHORIZED MEMBER
Name	RUSSO, CLIFTON	Name	RUSSO, LAWRENCE
Address	1355 WEST 44TH PL # 100 OFFICE	Address	1355 W 44TH PL # 100 OFFICE
City-State-Zip:	HIALEAH FL 33012	City-State-Zip:	HIALEAH FL 33012
Title	AUTHORIZED MEMBER, MANAGER	Title	AUTHORIZED MEMBER
Name	PISMO LLC	Name	LEVY, DEBORAH J
Address	1355 W 44 PL	Address	1355 W 44 PL
City-State-Zip:	HIALEAH FL 3301 FL 33012	City-State-Zip:	HIALEAH FL 33012

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: AMIR HAYUN

MGR

04/12/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date