

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000034682

**Entity Name:** CAREFREE 5TH STREET, LLC

**Current Principal Place of Business:**

1031 5TH STREET  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

1031 5TH STREET  
MIAMI BEACH, FL 33139

**FEI Number:** 20-0250331

**Certificate of Status Desired:** No

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

MAROTTA, GARY  
1031 5TH STREET  
MIAMI BEACH, FL 33139 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           MANAGING MEMBER  
Name           MAROTTA, GARY  
Address        1031 5TH STREET  
City-State-Zip: MIAMI BEACH FL 33139

Title           MANAGING MEMBER  
Name           MAROTTA, ANTHONY  
Address        1031 5TH STREET  
City-State-Zip: MIAMI BEACH FL 33139

*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:** ANTHONY MAROTTA

MGMBR

02/11/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date