

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000041657

**Entity Name:** 1607 GABLES VENTURE, LLC

**Current Principal Place of Business:**

6817 SW 81ST TERRACE  
MIAMI, FL 33143

**Current Mailing Address:**

6817 SW 81 TERRACE  
MIAMI, FL 33143 US

**FEI Number:** 20-2690346

**Certificate of Status Desired:** No

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

SHEAR, GARY O  
6817 SW 81 TERRACE  
MIAMI, FL 33143 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	Title	MGRM
Name	TREISTER, CHARLES	Name	SHEAR, GARY
Address	1624 MICANOPY AVE.	Address	6817 SW 81ST TERR
City-State-Zip:	MIAMI FL 33133	City-State-Zip:	MIAMI FL 33143

*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:** GARY SHEAR

MGRM

04/07/2017

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

\_\_\_\_\_ Date