

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000017899

**Entity Name:** PETER & LORRAINE INVESTMENT, LLC

**Current Principal Place of Business:**

2250 NW 95TH AVE  
DORAL, FL 33172

**Current Mailing Address:**

2250 NW 95TH AVE  
DORAL, FL 33172

**FEI Number:** 20-1241373

**Certificate of Status Desired:** No

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

ROSEN, STEVEN M  
400 SOUTH POINTE DRIVE  
SUITE 311  
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           | MGRM             | Title           | MGRM             |
| Name            | PENA, PETER A    | Name            | PENA, LORRAINE M |
| Address         | 2250 NW 95TH AVE | Address         | 2250 NW 95TH AVE |
| City-State-Zip: | DORAL FL 33172   | City-State-Zip: | DORAL FL 33172   |

*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:** LORRAINE M. PENA

**OWNER**

**02/10/2019**

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

\_\_\_\_\_  
Date