

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000038849

Entity Name: BOX STUART 24, LLC

Current Principal Place of Business:

5559 S UNIVERSITY DR. STE 306
DAVIE, FL 33328

Current Mailing Address:

5559 S UNIVERSITY DR. STE 306
DAVIE, FL 33328 US

FEI Number: 76-0760313

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHEDIAK, MIRTA
5559 S UNIVERSITY DR. STE 306
DAVIE, FL 33328 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
Name CIRICI, FRANCISCO
Address 11325 NW 66 ST.
City-State-Zip: MIAMI FL 33178

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: FRANCISCO CIRICI

MGR

03/28/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date