## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000083495

Entity Name: SKYLAKE REDEVELOPMENT, LLC

**Current Principal Place of Business:** 

1835 N.E. MIAMI GARDENS DRIVE # 144

NORTH MIAMI BEACH, FL 33179

**Current Mailing Address:** 

1835 N.E. MIAMI GARDENS DRIVE

NORTH MIAMI BEACH, FL 33179 US

FEI Number: 83-0422153 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PAUL, FRAYND 1835 NE MIAMI GARDENS DR SUITE 144 NORTH MIAMI BEACH, FL 33179 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: PAUL FRAYND 08/08/2022

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR Title MGR

Name FRAYND, MARCOS Name FRAYND, SAUL P.O. BOX 85066 Address P.O. BOX 85066 Address

HALLANDALE BEACH FL 33008 City-State-Zip: HALLANDALE BEACH FL 33008 City-State-Zip:

Title MGR Title MGR

Name FRAYND, FANNY FRAYND, PAUL Name

Address 2800 ISLAND BLVD., #2702 Address 1835 NE MIAMI GARDENS DR # 144 City-State-Zip: AVENTURA FL 33160 City-State-Zip: NORTH MIAMI BEACH FL 33179

Title VР Title MGR

ORNER, ERIC Name Name FRAYND, GLADYS

Address 5272 BOCA MARINA CIR SOUTH Address 5272 BOCA MARINA CIR SOUTH

City-State-Zip: BOCA RATON FL 33160 City-State-Zip: BOCA RATON FL 33160

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.

08/08/2022 SIGNATURE: PAUL FRAYND **MGR** 

**FILED** Aug 08, 2022

**Secretary of State** 

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