## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000093296

Entity Name: MALOOF ENTERPRISES, LLC

## **Current Principal Place of Business:**

100 SE 2 STREET #4400 MIAMI, FL 33131

## **Current Mailing Address:**

100 SE 2ND STREET #4400 MIAMI, FL 33131

**FEI Number: NOT APPLICABLE** 

Certificate of Status Desired: No

**FILED** Apr 07, 2016

**Secretary of State** 

CC6642599531

Name and Address of Current Registered Agent:

MALOOF, AL 100 SE 2ND STREET #4400 MIAMI, FL 33131 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 MR Title AUTHORIZED MEMBER MALOOF, AL Name Name BERDELLANS, ALBERT L.M.

**16322 NW 15TH STREET** Address 8150 SW 49 AVENUE Address MIAMI FL 33143 City-State-Zip: PEMBROKE PINES FL 33028 City-State-Zip:

04/07/2016 SIGNATURE: AL MALOOF **MGRM** 

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.