

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000020414

**Entity Name:** WALDORF PROPERTY MANAGEMENT GROUP, LLC

**Current Principal Place of Business:**

C/O CARLOS M. MARTINEZ  
1825 PONCE DE LEON BLVD., #401  
CORAL GABLES, FL 33134

**Current Mailing Address:**

C/O CARLOS M. MARTINEZ  
1825 PONCE DE LEON BLVD., #401  
CORAL GABLES, FL 33134 US

**FEI Number:** 90-0340918

**Certificate of Status Desired:** No

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

AUERBACH, MARC HESQ.  
201 S. BISCAYNE BLVD., SUITE #2000  
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 MGRM  
Name TRIA ADELFI CONSULTING, INC.  
Address 1514 MERCADO AVE  
City-State-Zip: CORAL GABLES FL 33146

Title MGRM  
Name KATZMAN, GIL  
Address 9008 DICKENS AVE  
City-State-Zip: SURFSIDE FL 33154

Title MGRM  
Name PERELIS, ALLAN  
Address 9550 BAY HARBOR TERRACE, SUITE  
209  
City-State-Zip: BAY HARBOR ISLANDS FL 33154

*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:** TRIA ADELFI CONSULTING, INC

MGRM

04/23/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date