

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000104457

**Entity Name:** 3900 CORAL RIDGE DRIVE ASSOCIATES, LLC

**Current Principal Place of Business:**

100 N. VILLAGE AVENUE  
SUITE 37  
ROCKVILLE CENTRE, NY 11570

**Current Mailing Address:**

100 N. VILLAGE AVENUE  
SUITE 37  
ROCKVILLE CENTRE, NY 11570 US

**FEI Number:** 20-5802785

**Certificate of Status Desired:** No

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

LAZER APTHEKER OF FL.  
525 OKEECHOBEE BLVD.  
WEST PALM BEACH, FL 33401 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 LEFFLER, STEVE  
Address 100 N. VILLAGE AVENUE, SUITE 37  
City-State-Zip: ROCKVILLE CENTRE NY 11570

Title MGRM  
Name ZUCKERBROT, SANFORD  
Address 35-11 35TH AVENUE  
City-State-Zip: LONG ISLAND CITY NY 11106

*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:** STEVEN LEFFLER

**MEMBER**

**02/06/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date