

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000123117

**Entity Name:** GLASSE BEACON LLC

**Current Principal Place of Business:**

11495 SW 241 STREET  
MIAMI, FL 33032

**Current Mailing Address:**

11495 SW 241 STREET  
MIAMI, FL 33032 US

**FEI Number:** 20-8121274

**Certificate of Status Desired:** No

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

GLASSE, MARY  
11495 SW 241 STREET  
MIAMI, FL 33032 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	DIRECTOR
Name	GLASSE, GARY R	Name	PENA, NADINE C
Address	11495 SW 241 STREET	Address	7520 N WINCHESTER AVE APT GE
City-State-Zip:	MIAMI FL 33032	City-State-Zip:	CHICAGO IL 60626
Title	DIRECTOR		
Name	PENA, CARLOS		
Address	7520 N WINCHESTER AVE APT GE		
City-State-Zip:	CHICAGO IL 60626		

*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:** GARY GLASSE

MR

01/14/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date