

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000056249

**FILED**  
**Feb 18, 2015**  
**Secretary of State**  
**CC3744104938**

**Entity Name:** INFINITY UNIVERSITY DRIVE 2 LLC

**Current Principal Place of Business:**

12000 BISCAYNE BLVD  
SUITE 407  
NORTH MIAMI, FL 33181

**Current Mailing Address:**

1920 E HALLANDALE BEACH BLVD  
SUITE 505  
HALLANDALE BEACH , FL 33009 US

**FEI Number:** 26-0274676

**Certificate of Status Desired:** No

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

GOLDFARB, IGHAL  
12000 BISCAYNE BLVD  
SUITE 407  
NORTH MIAMI, FL 33181 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 MGR  
Name INFINITY BH CORP.  
Address 12000 BISCAYNE BLVD  
SUITE 407  
City-State-Zip: NORTH MIAMI FL 33181

*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:** IGHAL GOLDFARB

**MANAGING MEMBER**

**02/18/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date