## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000009918

Entity Name: 50/50 MANAGEMENT LLC

**Current Principal Place of Business:** 

6195 WEST 19TH AVE MANAGEMENT OFFICE HIALEAH, FL 33012

**Current Mailing Address:** 

6195 WEST 19TH AVE MANAGEMENT OFFICE HIALEAH, FL 33012 US

FEI Number: 61-1553188 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOMEZ SANCHEZ, MERCEDES 1995 NE 117 RD 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

FILED Apr 11, 2013

**Secretary of State** 

CC0804256007

Authorized Person(s) Detail:

Title MGR Title MGRM

Name GOMEZ SANCHEZ, MERCEDES Name SANCHEZ, CHRISTOPHER

Address 1995 NE 117 RD Address 1995 NE 117 RD

City-State-Zip: NORTH MIAMI FL 33181 City-State-Zip: NORTH MIAMI FL 33181

Title MGRM

Name SANCHEZ, MICHAEL C

Address 1995 NE 117 RD

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GOMEZ SANCHEZ, MERCEDES

**MGR** 

04/11/2013