

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000038117

**Entity Name:** FLEIT GIBBONS GUTMAN BONGINI & BIANCO P.L.

**Current Principal Place of Business:**

551 N.W. 77TH STREET, SUITE 111  
BOCA RATON, FL 33487

**Current Mailing Address:**

551 N.W. 77TH STREET, SUITE 111  
BOCA RATON, FL 33487

**FEI Number:** 65-0963391

**Certificate of Status Desired:** No

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

GUTMAN, JOSE  
551 N.W. 77TH STREET, SUITE 111  
BOCA RATON, FL 33487 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 MARTIN FLEIT, P.A.  
Address 520 BRICKELL AVE, SUITE A201  
City-State-Zip: MIAMI FL 33131

Title MGRM  
Name JON A. GIBBONS, P.L.  
Address 3975 NW 23RD TERR  
City-State-Zip: BOCA RATON FL 33431

Title MGRM  
Name JOSE GUTMAN, P.L.  
Address 12643 LITTLE PALM LANE  
City-State-Zip: BOCA RATON FL 33428

Title MGRM  
Name STEPHEN BONGINI, P.L.  
Address 3000 ALTON ROAD  
City-State-Zip: MIAMI FL 33140

Title MGRM  
Name PAUL D. BIANCO, P.A.  
Address 2801 NE 208 TERRACE, SUITE 102  
City-State-Zip: AVENTURA FL 33180

*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:** JON GIBBONS

MANAGER

03/29/2016

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

\_\_\_\_\_  
Date