

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000043660

**Entity Name:** LAZMAR 275, LLC

**Current Principal Place of Business:**

8275 S.W. 5TH STREET  
MIAMI, FL 33144

**Current Mailing Address:**

8275 S.W. 5TH STREET  
MIAMI, FL 33144

**FEI Number:** 26-4421753

**Certificate of Status Desired:** No

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

FRAGA, MARINA  
8275 S.W. 5TH STREET  
MIAMI, FL 33144 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           MANAGER  
Name           FRAGA, MARINA  
Address        8275 SW 5 STREET  
City-State-Zip: MIAMI FL 33144

Title           MANAGER  
Name           CAYON, ROSA  
Address        8275 S.W. 5TH STREET  
City-State-Zip: MIAMI FL 33144

Title           MANAGER  
Name           FRAGA, RICARDO  
Address        8275 S.W. 5TH STREET  
City-State-Zip: MIAMI FL 33144

Title           MANAGER  
Name           FRAGA, CYNTHIA  
Address        8275 S.W. 5TH STREET  
City-State-Zip: MIAMI FL 33144

*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:** MARINA FRAGA

**MANAGER**

**04/24/2015**

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

\_\_\_\_\_ Date