

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000006874

**Entity Name:** NGP ENTERPRISES LLC

**Current Principal Place of Business:**

600 WREN AVE  
MIAMI SPRINGS, FL 33166

**Current Mailing Address:**

600 WREN AVE  
MIAMI SPRINGS, FL 33166

**FEI Number:** 26-4095555

**Certificate of Status Desired:** No

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

BURNS, HODARI  
4700 BISCAYNE BLVD  
501  
MIAMI, FL 33137 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            PRES  
Name            BURNS, HODARI  
Address        4700 BISCAYNE BLVD STE 501  
City-State-Zip: MIAMI FL 33137

*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:** HODARI BURNS

**PRESIDENT**

**04/22/2014**

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

\_\_\_\_\_  
Date