

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000018945

Entity Name: 519 S. K STREET, LLC

Current Principal Place of Business:

519 S. K STREET
LAKE WORTH, FL 33460

Current Mailing Address:

807 SUMMER ST
UNIT 5
MANCHESTER, MA 01944 US

FEI Number: 27-1951130

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZIKAKIS, SALOME
307 SE 14TH STREET
FORT LAUDERDALE, FL 33316 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 KOPPEL, DALE
Address 807 SUMMER ST
UNIT 5
City-State-Zip: MANCHESTER MA 01944

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: DALE KOPPEL

MGRM

04/24/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date