

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000101956

**Entity Name:** UBFPT - TX L.L.C.

**Current Principal Place of Business:**

3400 LAKESIDE DR.  
STE 510  
MIRAMAR, FL 33027

**Current Mailing Address:**

PO BOX 4338  
HIALEAH, FL 33014 US

**FEI Number:** 27-3599457

**Certificate of Status Desired:** No

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

SCHUK, CHRISTOPHER  
3400 LAKESIDE DR.  
STE 510  
MIRAMAR, FL 33027 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	Title	MGR
Name	SCHUK, CHRISTOPHER	Name	GRALNICK, MARC
Address	PO BOX 4338	Address	PO BOX 4338
City-State-Zip:	HIALEAH FL 33014	City-State-Zip:	HIALEAH FL 33014

*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:** CHRISTOPHER SCHUK

**MGRM**

**05/01/2017**

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

\_\_\_\_\_  
Date