

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000016167

Entity Name: BROWARD COUNTY RESTORATION, LLC

Current Principal Place of Business:

925 SW 50TH TERRACE
MARGATE, FL 33068

Current Mailing Address:

925 SW 50TH TERRACE
MARGATE, FL 33068

FEI Number: 27-4822264

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOR, OFER
925 SW 50TH TERRACE
MARGATE, FL 33068 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 MGR
Name MOR, OFER
Address 925 SW 50TH TER
City-State-Zip: MARGATE FL 33068

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: OFER MOR

OWNER

03/26/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date