## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000090180

Entity Name: G.A.L.F. 5, LLC

**Current Principal Place of Business:** 

15 NW 7TH AVENUE

FORT LAUDERDALE, FL 33311

**Current Mailing Address:** 

15 NW 7TH AVENUE

FORT LAUDERDALE. FL 33311 US

FEI Number: 45-3622883 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARDO, LORENA A 20801 BISCAYNE BLVD SUITE 306 AVENTURA, FL 33180 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

FILED Apr 18, 2017

**Secretary of State** 

CC8357783455

Authorized Person(s) Detail:

Title MGRM Title MGRM

Name FAURE, MIGUEL A Name FAURE ZAPATA, FEDERICO E

Address 15 NW 7TH AVENUE Address 15 NW 7TH AVENUE

City-State-Zip: FORT LAUDERDALE FL 33311 City-State-Zip: FORT LAUDERDALE FL 33311

Title MGRM

Name ZAPATA DE FAURE, LAURA J

Address 15 NW 7TH AVENUE

City-State-Zip: FORT LAUDERDALE FL 33311

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: FAURE , MIGUEL A

Electronic Signature of Signing Authorized Person(s) Detail

**MGRM** 

04/18/2017