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: TOMAS DIAZ

Electronic Signature of Signing Authorized Person(s) Detail

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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

# Authorized Person(s) Detail ·

Authorized Person(s) Detail :			
Title	MGR	Title	S
Name	DIAZ, TOMAS	Name	DIAZ, TOMAS
Address	4809 AVENUE N 130	Address	4809 AVENUE N 130
City-State-Zip:	BROOKLYN NY 11234	City-State-Zip:	BROOKLYN NY 11234

# 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L11000100061

Entity Name: 428 COLLINS AVENUE UNIT 7 LLC

### **Current Principal Place of Business:**

4809 AVENUE N 130 BROOKLYN, NY 11234

## **Current Mailing Address:**

**4809 AVENUE N** 130 BROOKLYN, NY 11234 US

## **FEI Number: APPLIED FOR**

# Name and Address of Current Registered Agent:

PRESIDENT

03/28/2017 Date

FILED Mar 28, 2017 Secretary of State CC5587749957

Certificate of Status Desired: No

Date