

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000110138

Entity Name: KUMAR V,LLC**Current Principal Place of Business:**6820 NOVA DRIVE
APT 203
DAVIE, FL 33317**Current Mailing Address:**17121 COLLINS AVE
APT 2401
SUNNY ISLES BEACH, FL 33160 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MG DEVELOPMENT GROUP LLC
17121 COLLINS AVE
APT 2401
SUNNY ISLES BEACH, FL 33160 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	MG DEVELOPMENT GROUP
Address	17121 COLLINS AVE APT 2401
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	MGRM
Name	AMEZQUITA, ELENA MS
Address	17121 COLLINS AVE APT 2401
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	MGRM
Name	PARDO, DIEGO SR
Address	17121 COLLINS AVE APT 2401
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	MGRM
Name	PARDO, DIANA MS
Address	17121 COLLINS AVE APT 2401
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	MGRM
Name	PARDO, ANDRES SR
Address	17121 COLLINS AVE APT 2401
City-State-Zip:	SUNNY ISLES BEACH FL 33160

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: JUAN PABLO VALLEJO**MANAGER****03/26/2016**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date