## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000103400

**Entity Name: SLEEP GROUP PROPERTIES LLC** 

**Current Principal Place of Business:** 

2035 HARDING STREET, SUITE #200 HOLLYWOOD, FL 33020

**Current Mailing Address:** 

2035 HARDING STREET, SUITE #200 HOLLYWOOD. FL 33020 US

FEI Number: 38-3882689 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEN-DAVID, RAN 2035 HARDING STREET, SUITE #200 HOLLYWOOD, FL 33020 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** Jan 10, 2018

**Secretary of State** 

CC3142462118

Authorized Person(s) Detail:

Title MGRM Title **MGRM** 

BEN-DAVID, RAN Name Name COHEN, TAMIR

2035 HARDING STREET, SUITE #200 Address 2035 HARDING STREET Address HOLLYWOOD FL 33020

City-State-Zip: HOLLYWOOD FL 33020 City-State-Zip:

Title **MGRM** Title **MGRM** 

Name BEN-DAVID, SHAY BEN-DAVID, GAL Name

Address 2035 HARDING STREET Address 2035 HARDING STREET, SUITE #200 HOLLYWOOD FL 33020 City-State-Zip: City-State-Zip: HOLLYWOOD FL 33020

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.

01/10/2018 SIGNATURE: RAN BEN-DAVID **PRESIDENT**