## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000062623

Entity Name: AFT2005 LLC

**Current Principal Place of Business:** 

432 25TH STREET

WEST PALM BEACH, FL 33407

**Current Mailing Address:** 

P. O. BOX 4244

LANTANA, FL 33465 US

**FEI Number: APPLIED FOR** Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARSALI, ANTHONY A ESQ. ARSALI LLC 515 N FLAGLER DRIVE SUITE P-300 WEST PALM BEACH, FL 33401 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: ANTHONY ARSALI 04/26/2017

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Name

Address

**AUTHORIZED MEMBER** Title Title TRUSTEE, AUTHORIZED

REPRESENTATIVE

**FILED** Apr 26, 2017

**Secretary of State** 

CC3427858993

ARSALI FAMILY TRUST DATED Name ARSALI, NICHOLAS 12/13/2005

P. O. BOX 4244 Address P. O. BOX 4244

City-State-Zip: LANTANA FL 33465 City-State-Zip: LANTANA FL 33465

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: NICHOLAS ARSALI

Electronic Signature of Signing Authorized Person(s) Detail

TRUSTEE

04/26/2017

Date