

**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

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	AUTHORIZED MEMBER	Title	TRUSTEE, AUTHORIZED REPRESENTATIVE
Name	ARSALI FAMILY TRUST DATED 12/13/2005	Name	ARSALI, NICHOLAS
Address	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

TRUSTEE

04/26/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date