

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000080896

**Entity Name:** FORTUNA 4647 PINE TREE DRIVE, LLC

**Current Principal Place of Business:**

4647 PINE TREE DRIVE  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

4647 PINE TREE DRIVE  
MIAMI BEACH, FL 33140 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CF REGISTERED AGENT, INC.  
100 S. ASHLEY DRIVE  
SUITE 400  
TAMPA, FL 33602 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            MANAGER  
Name            MALZONI, VICTOR JR.  
Address        4647 PINE TREE DRIVE  
City-State-Zip: MIAMI BEACH FL 33140

Title            MANAGER  
Name            MALZONI, SUSAN HEREEN  
Address        4647 PINE TREE DRIVE  
City-State-Zip: MIAMI BEACH FL 33140

*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:** VICTOR MALZONI, JR.

**MANAGER**

**03/16/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date