

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000097306

Entity Name: DISTRESSED RE MIAMI LLC

Current Principal Place of Business:

8301 NW 197TH ST
MIAMI, FL 33015

Current Mailing Address:

8301 NW 197TH ST
MIAMI, FL 33015

FEI Number: 47-1130713

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHEEMA, BALWANT
8301 NW 197TH ST
MIAMI, FL 33015 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 NICASTRO, MASSIMO
Address 8301 NW 197TH ST
City-State-Zip: MIAMI FL 33015

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: NICASTRO , MASSIMO

MGR

03/23/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date