

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000124921

Entity Name: 16-PLEX 731, LLC

Current Principal Place of Business:

7737 NORTH UNIVERSITY DR.
207
TAMARACK, FL 33321

Current Mailing Address:

7737 NORTH UNIVERSITY DR.
207
TAMARAC, FL 33321

FEI Number: 47-1622987

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ADELSON, CHARLES
7737 NORTH UNIVERSITY DR.
207
TAMARAC, FL 33321 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: CHARLES ADELSON

01/11/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name ADELSON, CHARLES
Address 7737 NORTH UNIVERSITY DR.207
City-State-Zip: TAMARAC FL 33321

Title AMGR
Name ADELSON, HARVEY
Address 7737 NORTH UNIVERSITY DR.207
City-State-Zip: TAMARAC FL 33321

Title MANAGER, AUTHORIZED MEMBER
Name EXECUTIVE ENTERPRISES, INC.
Address 1348 EAST HILLSBORO BLVD
City-State-Zip: DEERFIELD BEACH FL 33441

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: ALEXANDER BERKOVICH

MANAGER

01/11/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date