

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000142862

**Entity Name:** 233 MADEIRA AVE LLC

**Current Principal Place of Business:**

233 MADEIRA AVE  
CORAL GABLES, FL 33134

**Current Mailing Address:**

POST OFFICE BOX 430280  
SOUTH MIAMI, FL 33243

**FEI Number:** 47-1893419

**Certificate of Status Desired:** No

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

AMIRIANFAR, ARMAN  
1100 S MIAMI AVE  
3601  
MIAMI, FL 33130 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:** ARMAN AMIRIANFAR

02/12/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MANAGER
Name	AMIRIANFAR, ARMAN	Name	AMIRIANFAR, KEYVAN
Address	1100 S MIAMI AVE 3601	Address	POST OFFICE BOX 430280
City-State-Zip:	MIAMI FL 33130	City-State-Zip:	SOUTH MIAM FL 33243

*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:** ARMAN AMIRIANFAR

**REGISTERED AGENT**

02/12/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date