

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000143090

**Entity Name:** 428 APARTMENTS LLC

**Current Principal Place of Business:**

5370 PALM AVENUE  
SUITE 1  
HIALEAH, FL 33012

**FILED**  
**Apr 14, 2016**  
**Secretary of State**  
**CC3039138460**

**Current Mailing Address:**

5370 PALM AVENUE  
SUITE 1  
HIALEAH, FL 33012

**FEI Number:** 30-0841188

**Certificate of Status Desired:** No

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

PETER M. LOPEZ, P.A.  
1911 NW 150 AVENUE  
SUITE 201  
PEMBROKE PINES, FL 33028 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                   | Title           | MGR                      |
| Name            | LOPEZ, JOSEPH M       | Name            | LOPEZ, JOSEPH            |
| Address         | 5370 PALM AVE SUITE 1 | Address         | 5370 PALM AVENUE SUITE 1 |
| City-State-Zip: | HIALEAH FL 33012      | City-State-Zip: | HIALEAH FL 33012         |

*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:** JOSEPH M. LOPEZ

**MGR**

**04/14/2016**

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

\_\_\_\_\_  
Date