

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000158154

**Entity Name:** REAL ESTATE JM LLC

**Current Principal Place of Business:**

6304 POWERLINE RD  
FORT LAUDERDALE, FL 33309

**Current Mailing Address:**

6304 POWERLINE RD  
FORT LAUDERDALE, FL 33309 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

ACCOUNTANT & MANAGEMENT INC  
1549 NE 123RD STREET  
NORTH MIAMI, FL 33161 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 MBR  
Name LOPEZ, MARIELA  
Address 6304 POWERLINE RD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title MBR  
Name LAINO, NATALIA  
Address 6304 POWERLINE RD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title AMBR  
Name SAFIRSZTEIN, GABRIEL  
Address 6304 POWERLINE RD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title AMBR  
Name DEAMBROSI, EMILIANO  
Address 6304 POWERLINE RD  
City-State-Zip: FORT LAUDERDALE FL 33309

*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:** LOPEZ MARIELA

MBR

04/21/2016

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

\_\_\_\_\_ Date