

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000142882

**Entity Name:** STRETCH CORAL GABLES LLC

**Current Principal Place of Business:**

2464 CORAL WAY  
MIAMI, FL 33145

**Current Mailing Address:**

14411 SOUTH DIXIE HIGHWAY  
SUITE 220  
PALMETTO BAY, FL 33176

**FEI Number:** 81-3471625

**Certificate of Status Desired:** No

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

LEVINE, JEREMY  
8124 GERBERA DRIVE  
#5102  
NAPLES, FL 34113 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            | LEVINE, JASON M                         | Name            | GORMAN, JOSEPH M                        |
| Address         | 14411 SOUTH DIXIE HIGHWAY, SUITE<br>220 | Address         | 14411 SOUTH DIXIE HIGHWAY, SUITE<br>220 |
| City-State-Zip: | PALMETTO BAY FL 33176                   | City-State-Zip: | PALMETTO BAY FL 33176                   |

*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:** JASON LEVINE

MGR

01/13/2017

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

\_\_\_\_\_  
Date