

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000187042

**Entity Name:** 2779 TROPIC RD, LLC

**Current Principal Place of Business:**

390 ROOSEVELT AVENUE  
SATELLITE BEACH, FL 32937

**Current Mailing Address:**

390 ROOSEVELT AVENUE  
SATELLITE BEACH, FL 32937 US

**FEI Number:** 81-4247969

**Certificate of Status Desired:** No

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

SHAPIRA, ARIEL  
390 ROOSEVELT AVENUE  
SATELLITE BEACH, FL 32937 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:** ARIEL SHAPIRA

04/29/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	AMBR
Name	SHAPIRA, ARIEL	Name	SHAPIRA, ARIEL
Address	390 ROOSEVELT AVENUE	Address	390 ROOSEVELT AVENUE
City-State-Zip:	SATELLITE BEACH FL 32937	City-State-Zip:	SATELLITE BEACH FL 32937

*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:** ARIEL SHAPIRA

MGR

04/29/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date