

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000072813

**Entity Name:** SOUTH BEACH UNIT 516K, LLC

**Current Principal Place of Business:**

C/O JADE & ASSOCIATES CPA  
990 BISCAYNE BLVD. SUITE 701  
MIAMI, FL 33132

**Current Mailing Address:**

C/O JADE & ASSOCIATES CPA  
990 BISCAYNE BLVD. SUITE 701  
MIAMI, FL 33132 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

GIANESE-PITTMAN P.A.  
100 N. BISCAYNE BOULEVARD  
3070  
MIAMI, FL 33132 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  
Name ALEXENITZER, MYRIAM  
Address PBOX# 75  
9 RUE EMILE DUBOIS  
City-State-Zip: PARIS 75014

*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:** MYRIAM ALEXENITZER

**MANAGER**

**03/18/2019**

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

\_\_\_\_\_  
Date