

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000097735

**Entity Name:** BAY914S LLC

**Current Principal Place of Business:**

1500 BAY ROAD, SUITE 914S  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

2999 NE 191ST STREET  
402  
AVENTURA, FL 33180 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

KLEINER LAW GROUP  
2999 NE 191ST STREET  
402  
AVENTURA, FL 33180 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 AMBR  
Name TEUNISSEN, CHRISTIAN  
Address 1500 BAY ROAD, SUITE 914S  
City-State-Zip: MIAMI BEACH FL 33139

Title AMBR  
Name SNAUWAERT, FREDERIK  
Address 1500 BAY ROAD, SUITE 914S  
City-State-Zip: MIAMI BEACH FL 33139

Title AMBR  
Name VAN DEN NIEUWENHUIJZ, BAS  
Address 1500 BAY ROAD, SUITE 914S  
City-State-Zip: MIAMI BEACH FL 33139

Title AMBR  
Name VAN DEN NIEUWENHUIJZ, BOB  
Address 1500 BAY ROAD, SUITE 914S  
City-State-Zip: MIAMI BEACH FL 33139

Title AMBR  
Name BAL, VERONIQUE  
Address 1500 BAY ROAD  
SUITE 914S  
City-State-Zip: MIAMI BEACH FL 33139

*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:** FREDERIK SNAUWAERT

**MANAGER**

**02/02/2019**

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

\_\_\_\_\_  
Date