

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000133127

**Entity Name:** 1604 E 4TH AVE, LLC

**Current Principal Place of Business:**

1604 E 4TH AVE  
TAMP, FL 33605

**Current Mailing Address:**

PO BOX 5001  
TAMPA, FL 33675 US

**FEI Number: 82-1939422**

**Certificate of Status Desired: No**

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

GORMAN, DANIEL  
1906 W NORTH A STREET  
TAMPA, FL 33606 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	AMBR
Name	GORMAN, DANIEL	Name	GORMAN, CLAUDIA
Address	1906 W NORTH A STREET	Address	1906 W NORTH A STREET
City-State-Zip:	TAMPA FL 33606	City-State-Zip:	TAMPA FL 33606

*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: DANIEL GORMAN**

**MGR**

**01/24/2020**

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

\_\_\_\_\_  
Date