

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000150770

Entity Name: B&B 1093 NE 79TH STREET, LLC

Current Principal Place of Business:

1451 OCEAN DRIVE
SUITE 205
MIAMI BEACH, FL 33139

Current Mailing Address:

1451 OCEAN DRIVE
SUITE 205
MIAMI BEACH, FL 33139

FEI Number: 36-4873262

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WATTS-FITZGERALD, ABIGAIL C
2800 PONCE DE LEON BOULEVARD
SUITE 1400
CORAL GABLES, FL 33134 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 PRESIDENT
Name BOUCHER, JAMES R
Address 1451 OCEAN DRIVE , SUITE 205
City-State-Zip: MIAMI BEACH FL 33139

Title VP
Name BOUCHER, MICHAEL
Address 1451 OCEAN DRIVE , SUITE 205
City-State-Zip: MIAMI BEACH FL 33139

Title VP
Name BOUCHER, STEVEN
Address 1451 OCEAN DRIVE , SUITE 205
City-State-Zip: MIAMI BEACH FL 33139

Title VP, SECRETARY, TREASURER
Name BOUCHER, PERRY
Address 1451 OCEAN DRIVE , SUITE 205
City-State-Zip: MIAMI BEACH FL 33139

Title CFO
Name CEDRATI, ADAM
Address 1451 OCEAN DRIVE , SUITE 205
City-State-Zip: MIAMI BEACH FL 33139

Title MANAGER
Name B&B MANAGEMENT HOLDINGS, INC.
Address 1451 OCEAN DRIVE
 SUITE 205
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: ABIGAIL C. WATTS-FITZGERALD

**AUTHORIZED
REPRESENTATIVE**

04/16/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date