

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000226524

**Entity Name:** VETERAN MANAGEMENT, LLC

**Current Principal Place of Business:**

AL MALOOF  
100 SE 2 STREET 4500  
MIAMI, FL 33131

**Current Mailing Address:**

8150 PONCE DE LEON RD.  
MIAMI, FL 33143

**FEI Number:** 83-0807850

**Certificate of Status Desired:** No

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

MALOOF, AL  
100 SE 2 STREET  
#4400  
MIAMI, FL 33131 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 MALOOF, MARIA  
Address 8150 PONCE DE LEON RD.  
City-State-Zip: MIAMI FL 33143

Title MGR  
Name MALOOF, AL  
Address 100 SE 2 STREET, #4400  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name RETTIG, PRISCILLA  
Address 8150 PONCE DE LEON RD.  
City-State-Zip: MIAMI FL 33143

*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:** AL MALOOF

MGR

06/25/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date