

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000124555

**Entity Name:** 5725 NW 186TH STREET OPERATIONS, LLC

**Current Principal Place of Business:**

5102 W. LAUREL ST.  
SUITE 700  
TAMPA, FL 33607

**FILED**  
**Feb 15, 2019**  
**Secretary of State**  
**0984393313CC**

**Current Mailing Address:**

5102 W. LAUREL ST.  
SUITE 700  
TAMPA, FL 33607 US

**FEI Number:** 83-0772955

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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	Title	PRESIDENT
Name	MLNM MASTER TENANT, LLC	Name	PASTOR, MIRIAM
Address	5102 W. LAUREL ST. SUITE 700	Address	5102 W. LAUREL ST. SUITE 700
City-State-Zip:	TAMPA FL 33607	City-State-Zip:	TAMPA FL 33607

*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:** MIRIAM PASTOR

**PRESIDENT**

**02/15/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date