# 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L18000176632

#### Entity Name: 1429 NW 7TH AVE LLC

# **Current Principal Place of Business:**

16232 MIRA VISTA LN DELRAY BEACH. FL 33446

# **Current Mailing Address:**

16232 MIRA VISTA LN DELRAY BEACH. FL 33446

# FEI Number: 83-1317737

## Name and Address of Current Registered Agent:

OWENS, GARY W 16232 MIRA VISTA LN DELRAY BEACH, FL 33446 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: GARY W OWENS

Electronic Signature of Registered Agent

## Authorized Person(s) Detail :

Title	MGR
Name	OWENS, GARY W
Address	16232 MIRA VISTA LN
City-State-Zip:	DELRAY BEACH FL 33446

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: GARY W. OWENS

MANAGER

01/27/2019

Electronic Signature of Signing Authorized Person(s) Detail

Jan 27, 2019 Secretary of State 9921160111CC

FILED

Certificate of Status Desired: No

01/27/2019 Date

Date