

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000102984

Entity Name: 5789 NW 7TH AVE MTLV LLC

Current Principal Place of Business:

11700 NW 29TH PLACE
SUNRISE, FL 33323

Current Mailing Address:

11700 NW 29TH PLACE
SUNRISE, FL 33323

FEI Number: 37-1944409

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ADMONI, KEREN
8043 TWIN LAKE DRIVE
BOCA RATON, FL 33496 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 SHIPONI, YARON
Address 11700 NW 29TH PLACE
City-State-Zip: SUNRISE FL 33323

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: YARON SHIPONI

MR

01/28/2020

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date