

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000156216

**Entity Name:** ABA17 LLC

**Current Principal Place of Business:**

18800 NE 29TH AVE  
APT 528  
AVENTURA, FL 33180

**Current Mailing Address:**

18800 NE 29TH AVE  
APT 528  
AVENTURA, FL 33180

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

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

BENZAKEN AMAR, ABRAHAM  
18800 NE 29TH AVE  
APT 528  
AVENTURA, FL 33180 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            MBR  
Name            BENZAKEN AMAR, ABRAHAM  
Address        18800 NE 29TH AVE, APT 528  
City-State-Zip: AVENTURA FL 33180

*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:** ABRAHAM BENZAKEN AMAR

MBR

03/08/2021

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date