

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000259623

**Entity Name:** BRETT M LIEBMAN PA

**Current Principal Place of Business:**

18205 BISCAYNE BLVD.  
SUITE 2218  
AVENTURA, FL 33160

**Current Mailing Address:**

18205 BISCAYNE BLVD  
SUITE 2218  
AVENTURA, FL 33160

**FEI Number:** 93-1573065

**Certificate of Status Desired:** No

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

LIEBMAN, BRETT M  
1776 POLK STREET  
APT. 1805  
HOLLYWOOD, FL 33020 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 LIEBMAN, BRETT M  
Address 18205 BISCAYNE BLVD  
City-State-Zip: AVENTURA FL 33160

*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:** LIEBMAN, BRETT M

MGR

01/20/2024

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

\_\_\_\_\_  
Date