

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L95000000715

Entity Name: MASSRY FLORIDA, L.C.

Current Principal Place of Business:

BELLA VISTA MID-RISE N.
20165 N.E. 39TH PL.
AVENTURA, FL 33180

Current Mailing Address:

BELLA VISTA MID-RISE N.
20165 N.E. 39TH PL.
AVENTURA, FL 33180

FEI Number: 14-1785920

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MASSRY, MORRIS
BELLA VISTA MID-RISE N.
20165 N.E. 39TH PL.
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 MGR
Name MASSRY, MORRIS
Address 20165 N.E. 39TH PLACE
City-State-Zip: AVENTURA FL 33180

Title MGRM
Name BIBAS, JACK
Address 17 LANDING CREEK
City-State-Zip: WILLIAMSVILLE NY 14221

Title MGRM
Name BOSSERT, MICHAEL
Address 22 HILANDER DR
City-State-Zip: ALBANY NY 12211

Title MANAGER
Name MASSRY, NORMAN
Address 255 WASHINGTON AVE EXT
City-State-Zip: ALBANY NY 12205

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: NORMAN MASSRY

MANAGER

02/13/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date