## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L96000001106

Entity Name: 1744 NW 36TH ST, L.C.

**Current Principal Place of Business:** 

419 WEST 49TH STREET, #106 HIALEAH, FL 33012-3602

**Current Mailing Address:** 

419 WEST 49TH STREET, #106 HIALEAH, FL 33012-3602

FEI Number: 65-0704546 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REAL PROPERTY CARE, INC. 419 WEST 49TH STREET, #106 HIALEAH, FL 33012-3602 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

FILED Apr 17, 2014

**Secretary of State** 

CC7066967302

Authorized Person(s) Detail:

Title MGR Title

Name FISHER, RONALD P Name FISHER, JAMES Q

Address 419 WEST 49TH STREET, #106 Address 419 WEST 49TH STREET, #106

City-State-Zip: HIALEAH FL 33012-3602 City-State-Zip: HIALEAH FL 33012-3602

Title MGR

Name FISHER, RICHARD J

Address 419 WEST 49TH STREET, #106

City-State-Zip: HIALEAH FL 33012-3602

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: JAMES Q. FISHER MGR

Electronic Signature of Signing Authorized Person(s) Detail

MGR 04/17/2014

MGR

Date