

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L97000000537

**Entity Name:** GOTHAM ENTERPRISES 702, L.C.

**Current Principal Place of Business:**

1300 COLLINS AVE  
#100  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

1300 COLLINS AVE  
#100  
MIAMI BEACH, FL 33139

**FEI Number:** 65-0763109

**Certificate of Status Desired:** No

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

SCHLESSER, MELVYN  
1300 COLLINS AVE  
#100  
MIAMI BEACH, FL 33139 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 SCHLESSER, MEL  
Address 1300 COLLINS AVE #100  
City-State-Zip: MIAMI BEACH FL 33139

Title MGRM  
Name LEEDS, ARTHUR  
Address 215 W. 83RD ST.  
City-State-Zip: NEW YORK NY 10024

Title MGRM  
Name GERSHON, ROBERT  
Address 315 W. 55TH STREET  
City-State-Zip: NEW YORK NY 10019

Title MGRM  
Name GERSHON, MELVIN  
Address 315 W. 55TH STREET  
City-State-Zip: NEW YORK NY 10019

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MELVYN SCHLESSER

**PRESIDENT**

**01/29/2013**

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

\_\_\_\_\_  
Date