

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000081057

Entity Name: 143 WASHINGTON LLC

**FILED**  
**Apr 02, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

19540 PLANTERS POINT DRIVE  
BOCA RATON, FL 33434

**New Principal Place of Business:**

**Current Mailing Address:**

19540 PLANTERS POINT DRIVE  
BOCA RATON, FL 33434

**New Mailing Address:**

FEI Number: 02-0751700

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KARYO, ARLENE  
19540 PLANTERS POINTE DRIVE  
BOCA RATON, FL 33434 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: KARYO, ARLENE  
Address: 19540 PLANTERS POINTE DRIVE  
City-St-Zip: BOCA RATON, FL 33434

Title: MGRM  
Name: KARYO, MICHEL  
Address: 5539 N. MILITARY TRAIL,  
City-St-Zip: BOCA RATON, FL 33496

Title: MGRM  
Name: KARYO, ARMAND  
Address: 213 SONATA COURT  
City-St-Zip: EASTPORT, NY 11941

Title: MGRM  
Name: SHIFF, CATHERINE  
Address: 75 HAZELWOOD DRIVE  
City-St-Zip: JERICO, NY 11753

I hereby certify that the information indicated on this 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.

SIGNATURE: ARLENE KARYO

MGR

04/02/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date