

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000019632

Entity Name: 890 W. 84 ST., LLC

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

13647 DEERING BAY DRIVE  
112  
CORAL GABLES, FL 33158 US

**New Principal Place of Business:**

**Current Mailing Address:**

13647 DEERING BAY DRIVE  
112  
CORAL GABLES, FL 33158 US

**New Mailing Address:**

FEI Number: 26-2251839

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FISHER, BENITA  
13647 DEERING BAY DRIVE  
112  
CORAL GABLES, FL 33158 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: MRS  
Name: FISHER, BENITA  
Address: 13647 DEERING BAY DR # 112  
City-St-Zip: CORAL GABLES, FL 33158

Title: MRS  
Name: SHELDON, REBECCA  
Address: 606 NORTH LAKE SHORE DRIVE APT #5403  
City-St-Zip: CHICAGO, IL 60611

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: BENITA FISHER

MANA

01/04/2012

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