

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000036141

Entity Name: 165 NE 158 STREET LLC

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

515 NE 190 STREET  
MIAMI, FL 33179 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 611572  
MIAMI, FL 33261 US

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

JAKE, BUTLER  
1805 SANS SOUCI BLVD, #116  
MIAMI, FL 33181 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: MGR  
Name: FREEMAN, BONNIE  
Address: 515 NE 190 STREET  
City-St-Zip: MIAMI, FL 33179 US

Title: MGR  
Name: FREEMAN, JON  
Address: 515 NE 190 STREET  
City-St-Zip: MIAMI, FL 33129

Title: MGR  
Name: BUTLER, JAKE  
Address: PO BOX 611572  
City-St-Zip: MIAMI, FL 33261

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: JAKE BUTLER

MGR

04/29/2012

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