

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M08000001789

Entity Name: FORTRESS ESTATES LLC

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

401 E. LAS OLAS BLVD,  
SUITE 1400  
FT. LAUDERDALE, FL 33301

**New Principal Place of Business:**

7950 NW 53RD STREET  
SUITE 337  
MIAMI, FL 33166

**Current Mailing Address:**

P.O.BOX 290443  
DAVIE, FL 33329

**New Mailing Address:**

FEI Number: 26-0903620

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CRAIG, JESSEL  
401 E. LAS OLAS BLVD,  
SUITE 1400  
FT. LAUDERDALE, FL 33301 US

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

OFFIX SOLUTIONS  
7950 NW 53RD STREET  
SUITE 337  
MIAMI, FL 33166 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: JONATHAN ASERRAF

05/01/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: FORTRESS ESTATES GROUP L.L.C.  
Address: P.O. BOX 290443  
City-St-Zip: DAVIE, FL 33329

Title: MGRM  
Name: CRAIG, JESSEL  
Address: P.O. BOX 290443  
City-St-Zip: DAVIE, FL 33329

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: JESSEL CRAIG

MGRM

05/01/2012

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