

**2017 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A00000000896

**Entity Name:** THE PERLOFF ENTERPRISES LIMITED LIABILITY LIMITED PARTNERSHIP

**FILED**  
**Feb 09, 2017**  
**Secretary of State**  
**CC7633268526**

**Current Principal Place of Business:**

441 NE 13TH AVE.  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

441 NE 13TH AVE.  
FORT LAUDERDALE, FL 33301 US

**FEI Number: 65-1016517**

**Certificate of Status Desired: No**

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

PRATT, DAVID ESQ.  
2255 GLADES RD.  
BOCA RATON, FL 33431 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

**General Partner Detail :**

Document # \_\_\_\_\_  
Name DAVID E. PERLOFF DECLARATION OF TRUST  
Address 441 NE 13TH AVE.  
City-State-Zip: FORT LAUDERDALE FL 33301

Document # \_\_\_\_\_  
Name PERLOFF, JOHN W  
Address 1177 SE 3RD AVE  
City-State-Zip: FORT LAUDERDALE FL 33316

Document # \_\_\_\_\_  
Name CLAY, BETH  
Address 4488 N. STAR RIDGE LANE  
City-State-Zip: APPLETON WI 54913

*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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

SIGNATURE: DAVID PERLOFF

MANAGER

02/09/2017

\_\_\_\_\_ Electronic Signature of Signing General Partner Detail

\_\_\_\_\_ Date