

**2024 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A04000000349

**Entity Name:** BERKOWITZ FAMILY LIMITED PARTNERSHIP, LLLP

**Current Principal Place of Business:**

11401 NORTHWEST 19TH STREET  
PLANTATION, FL 33323

**Current Mailing Address:**

11401 NORTHWEST 19TH STREET  
PLANTATION, FL 33323 US

**FEI Number: 45-0536909**

**Certificate of Status Desired: No**

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

BERKOWITZ, BRUCE M.D.  
11401 NW 19TH ST.  
PLANTATION, FL 33323 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 BERKOWITZ, JOANNA

Address 11401 NORTHWEST 19TH STREET

City-State-Zip: PLANTATION FL 33323

*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: JOANNA BERKOWITZ**

**GENERAL PARTNER**

**01/27/2024**

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

\_\_\_\_\_ Date