

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000040152

**Entity Name:** NW 43RD ST, INC.

**Current Principal Place of Business:**

7560 NW 43RD STREET  
MIAMI, FL 33166

**Current Mailing Address:**

PO BOX 522775  
MIAMI, FL 33152

**FEI Number: 32-0144414**

**Certificate of Status Desired: Yes**

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

ADER, ROBERT ESQ.  
100 S.E. 2ND STREET, SUITE 3550  
MIAMI, FL 33131 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

**Officer/Director Detail :**

Title            D  
Name            LYCKE, TIMOTHY  
Address        272 PAYNE DRIVE  
City-State-Zip: MIAMI SPRINGS FL 33166

Title            D  
Name            ENGLEMAN, LEWIS  
Address        1880 S. TREASURE DR UNIT 3P  
City-State-Zip: NORTH BAY VILLAGE FL 33141

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: LEWIS ENGLEMAN**

**TREASURER**

**02/26/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date