## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000055669

Entity Name: ABRAMS 565 NW 27 STREET, LLC.

**Current Principal Place of Business:** 

321 MANOR PLACE

CORAL GABLES, FL 33133

**Current Mailing Address:** 

321 MANOR PLACE CORAL GABLES. FL 33133

FEI Number: 20-0293116 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABRAMS, PETER 321 MANOR PLACE CORAL GABLES, FL 33133 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.

Title

**MGRM** 

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Apr 17, 2017

**Secretary of State** 

CC9391065437

Authorized Person(s) Detail:

Title MGRM

NameABRAMS, PATRICE TNameABRAMS, PETERAddress321 MANOR PLACEAddress321 MANOR PLACE

City-State-Zip: MIAMI FL 33133 City-State-Zip: CORAL GABLES FL 33133

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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PETER ABRAMS OWNER MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

04/17/2017

Date