

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000055669

Entity Name: ABRAMS 565 NW 27 STREET, LLC.

Current Principal Place of Business:

6949 N. CALUMET CIRCLE
LAKE WORTH , FL 33467

Current Mailing Address:

6949 N. CALUMET CIRCLE
LAKE WORTH , FL 33467 US

FEI Number: 20-0293116

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABRAMS, PETER F MANAGER
6949 N. CALUMET CIRCLE
LAKE WORTH , FL 33467 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: PETER ABRAMS

01/22/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	ABRAMS, PATRICE T	Name	ABRAMS, PETER
Address	6949 N. CALUMET CIRCLE	Address	6949 N. CALUMET CIRCLE
City-State-Zip:	LAKE WORTH FL 33467	City-State-Zip:	LAKE WORTH FL 33467

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

01/22/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date