

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000088659

**Entity Name:** 5544 PEMBROKE ROAD LLC

**Current Principal Place of Business:**

5544 PEMBROKE ROAD  
WEST PARK, FL 33023

**Current Mailing Address:**

P.O. BOX 121135  
FORT LAUDERDALE, FL 33312 US

**FEI Number:** 26-3397521

**Certificate of Status Desired:** No

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

MOSS, ANGINE CMGR  
5544 PEMBROKE ROAD  
WEST PARK, FL 33023 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

**Authorized Person(s) Detail :**

Title MGR  
Name MOSS, ANGINE C  
Address 5544 PEMBROKE ROAD  
City-State-Zip: WEST PARK FL 33023

*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:** ANGINE MOSS

MGR

02/26/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date