

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000113629

Entity Name: 730 N OCEAN POMPANO, LLC**Current Principal Place of Business:**2295 CORPORATE BLVD. NW, SUITE 222
BOCA RATON, FL 33431**Current Mailing Address:**2295 CORPORATE BLVD. NW, SUITE 222
BOCA RATON, FL 33431**FEI Number:** 26-3869395**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HERRICK, NORTON
2295 CORPORATE BLVD. NW, SUITE 222
BOCA RATON, FL 33431 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	CON
Name	KERMALLI, NISAR
Address	2 RIDGEDALE AVENUE, SUITE 370
City-State-Zip:	CEDAR KNOLLS NJ 07927

Title	MANAGER
Name	HERRICK, EVAN
Address	2 RIDGEDALE AVE # 370
City-State-Zip:	CEDAR KNOLLS NJ 07927

Title	MANAGER
Name	HERRICK, HOWARD
Address	2 RIDGEDALE AVE # 370
City-State-Zip:	CEDAR KNOLLS NJ 07927

Title	MANAGER
Name	HERRICK, MICHAEL
Address	2 RIDGEDALE AVE # 370
City-State-Zip:	CEDAR KNOLLS NJ 07927

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: NISAR KERMALLI**CONTROLLER****01/25/2016**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date