

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000028579

Entity Name: KLUGER, KAPLAN, SILVERMAN, KATZEN & LEVINE, P.L.

FILED
Mar 19, 2014
Secretary of State
CC1619223030

Current Principal Place of Business:

201 S. BISCAYNE BOULEVARD
SUITE 1700
MIAMI, FL 33131

Current Mailing Address:

201 S. BISCAYNE BOULEVARD
SUITE 1700
MIAMI, FL 33131

FEI Number: 26-4527913

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KAPLAN, ABBEY L
201 S. BISCAYNE BOULEVARD
SUITE 1700
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

Authorized Person(s) Detail :

Title MGR
Name KLUGER, ALAN J
Address 201 S. BISCAYNE BOULEVARD, STE 1700
City-State-Zip: MIAMI FL 33131

Title MGR
Name KAPLAN, ABBEY L
Address 201 S. BISCAYNE BOULEVARD, STE 1700
City-State-Zip: MIAMI FL 33131

Title MGR
Name SILVERMAN, STEVE I
Address 201 S. BISCAYNE BOULEVARD, STE 1700
City-State-Zip: MIAMI FL 33131

Title MGR
Name KATZEN, BRUCE A
Address 201 S. BISCAYNE BOULEVARD, STE 1700
City-State-Zip: MIAMI FL 33131

Title MGR
Name LEVINE, TODD A
Address 201 S. BISCAYNE BOULEVARD, STE 1700
City-State-Zip: MIAMI FL 33131

Title MGR
Name MARKS, JASON R
Address 201 S. BISCAYNE BOULEVARD, STE 1700
City-State-Zip: MIAMI FL 33131

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: ABBEY L. KAPLAN

MANAGER

03/19/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date