## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000139328

Entity Name: 3603 W. CLEVELAND STREET, LLC

**Current Principal Place of Business:** 

3603 W. CLEVELAND STREET

TAMPA, FL 33609

**Current Mailing Address:** 

4203 W. CULBREATH AVENUE TAMPA, FL 33609 US

FEI Number: 45-4015409 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COHEN, ROBERT 4203 W. CULBREATH AVENUE TAMPA, FL 33609 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

**FILED** Mar 20, 2014

**Secretary of State** 

CC2577428996

Authorized Person(s) Detail:

Title MGRM Title **MGRM** 

COHEN, ROBERT Name Name COHEN, CHRISTINE

4203 W. CULBREATH AVENUE Address 4203 W. CULBREATH AVENUE Address

City-State-Zip: TAMPA FL 33609 City-State-Zip: **TAMPA FL 33609** 

Title **MGRM** 

CHRISTINE COHEN TBTE, ROBERT Name

Address 4203 W. CULBREATH AVENUE

City-State-Zip: TAMPA FL 33609

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: ROBERT COHEN

Electronic Signature of Signing Authorized Person(s) Detail

**MEMBER** 

03/20/2014 Date