

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000038916

**Entity Name:** 79 BISCAYNE PLAZA, LLC

**Current Principal Place of Business:**

4125 NW 88TH AVENUE  
SUNRISE, FL 33351

**Current Mailing Address:**

4125 NW 88TH AVENUE  
SUNRISE, FL 33351 US

**FEI Number:** 46-2275470

**Certificate of Status Desired:** No

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

MARCUS, ALAN JESQ.  
20803 BISCAYNE BOULEVARD  
SUITE 301  
AVENTURA, FL 33180 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	VALERO, DORON
Address	4125 NW 88TH AVENUE
City-State-Zip:	SUNRISE FL 33351
Title	MGR
Name	NAVARRO, GABRIEL
Address	9155 S. DADELAND BOULEVARD, SUITE 1216
City-State-Zip:	MIAMI FL 33156

Title	MGR
Name	PICO, MARTIN
Address	4125 NW 88TH AVENUE
City-State-Zip:	SUNRISE FL 33351
Title	MGR
Name	ZITVAR, RAFI
Address	15866 CHAMPIONS FOREST DR
City-State-Zip:	SPRING TX 77379

*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:** DORON VALERO

MGR

02/15/2019

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date