

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000122538

**Entity Name:** MIAMIKOLUX, LLC

**Current Principal Place of Business:**

1750 N. BAYSHORE DRIVE, AP. 2605  
MIAMI, FL 33132

**Current Mailing Address:**

1750 N. BAYSHORE DRIVE, AP. 2605  
MIAMI, FL 33132 US

**FEI Number:** 46-3573790

**Certificate of Status Desired:** No

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

DODEV, PLAMEN  
1750 N. BAYSHORE DRIVE  
2605  
MIAMI BEACH, FL 33132 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:** PLAMEN DODEV

04/20/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	TOMOV, HRISTO	Name	DODEV, PLAMEN
Address	1750 N. BAYSHORE DRIVE, AP. 2605	Address	1750 N. BAYSHORE DRIVE, AP. 2605
City-State-Zip:	MIAMI FL 33132	City-State-Zip:	MIAMI FL 33132

*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:** HRISTO TOMOV

**MANAGER**

04/20/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date