

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000031043

**Entity Name:** GABLES SHOPS, LLC

**Current Principal Place of Business:**

6699 NW 36 AVENUE  
MIAMI, FL 33147

**Current Mailing Address:**

6699 NW 36 AVENUE  
MIAMI, FL 33147 US

**FEI Number:** 46-5009562

**Certificate of Status Desired:** No

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

LAPCIUC, MARCOS  
6699 NW 36 AVENUE  
MIAMI, FL 33147 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 LAPCIUC, MARCOS  
Address 6699 NW 36 AVENUE  
City-State-Zip: MIAMI FL 33147

Title MGR  
Name LAPCIUC, ISRAEL  
Address 6699 NW 36 AVENUE  
City-State-Zip: MIAMI FL 33147

Title MGR  
Name LAPCIUC, YAIR  
Address 6699 NW 36 AVENUE  
City-State-Zip: MIAMI FL 33147

*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:** MARCOS LAPCIUC

MGR

02/25/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date