

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000062613

**Entity Name:** 432 COMO, LLC

**Current Principal Place of Business:**

432 COMO AVENUE  
CORAL GABLES, FL 33146

**Current Mailing Address:**

6405 NW 36 STREET  
SUITE 213  
VIRGINIA GARDENS, FL 33166 US

**FEI Number:** 46-5416749

**Certificate of Status Desired:** No

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

ALECO HARALAMBIDES, PA  
3135 SW 3RD AVENUE  
MIAMI, FL 33129 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            AMBR  
Name            CHANOUHA, AFIF  
Address        6405 NW 36 STREET, SUITE 213  
City-State-Zip: VIRGINIA GARDENS FL 33166

*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:** AFIF CHANOUHA

**MANAGER**

**02/18/2016**

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

\_\_\_\_\_  
Date