## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000179758

**Entity Name: MEGACENTER BROWARD LLC** 

**Current Principal Place of Business:** 

8600 NW SOUTH RIVER SUITE 100 MEDLEY, FL 33166

**FILED** Feb 09, 2015 **Secretary of State** CC3155389276

## **Current Mailing Address:**

8600 NW SOUTH RIVER SUITE 100 MEDLEY, FL 33166 US

**FEI Number: NOT APPLICABLE** Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CFRA, LLC 100 S ASHLEY DRIVE STE 400 TAMPA, FL 33602 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 Title MGR

URETA, PATRICIO WICHMANN, PABLO Name Name 8600 NW SOUTH RIVER 8600 NW SOUTH RIVER Address Address SUITE 100

SUITE 100

MEDLEY FL 33166 MEDLEY FL 33166 City-State-Zip: City-State-Zip:

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.

02/09/2015 SIGNATURE: PATRICIO URETA **MANAGER**