

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000085240

**Entity Name:** ONTRACK MIAMI LLC

**Current Principal Place of Business:**

1027 PATHFINDER WAY  
SUITE 110  
ROCKLEDGE, FL 32955-3267

**Current Mailing Address:**

1027 PATHFINDER WAY  
SUITE 110  
ROCKLEDGE, FL 32955-3267 US

**FEI Number:** 47-4004661

**Certificate of Status Desired:** No

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

PLEZIA, GARY C  
1027 PATHFINDER WAY  
SUITE 110  
ROCKLEDGE, FL 32955-3267 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            PLEZIA, GARY C  
Address        1027 PATHFINDER WAY - SUITE 110  
City-State-Zip: ROCKLEDGE FL 32955-3267

Title            AMBR  
Name            MIRAGE PROFIT SHARING PLAN  
Address        3810 MURRELL ROAD, SUITE 148  
City-State-Zip: ROCKLEDGE FL 32955

Title            AMBR  
Name            RHODES, TAMMIE  
Address        1027 PATHFINDER WAY  
                  SUITE 110  
City-State-Zip: ROCKLEDGE FL 32955-3267

*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:** TAMMIE RHODES

AMBR

06/17/2020

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

\_\_\_\_\_  
Date