

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000203189

Entity Name: 715 1/2 EAST PIKE STREET LLC

Current Principal Place of Business:

415 ANDREWS AVENUE
DELRAY BEACH, FL 33483

Current Mailing Address:

415 ANDREWS AVENUE
DELRAY BEACH, FL 33483

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SABRA, RICHARD B
4600 SHERIDAN STREET
SUITE 300
HOLLYWOOD, FL 33021 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 CALABRETTA, JOCELYN
Address 415 ANDREWS AVENUE
City-State-Zip: DELRAY BEACH FL 33483

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: JOCELYN CALABRETTA

MGR

04/29/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date