

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000064701

**Entity Name:** 505 N. KROME, LLC

**Current Principal Place of Business:**

505 N. KROME AVENUE  
HOMESTEAD, FL 33030

**Current Mailing Address:**

26630 SW 174 PLACE  
HOMESTEAD, FL 33031 US

**FEI Number:** 81-2547740

**Certificate of Status Desired:** No

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

GERMAIN, BRYAN ST.  
505 N. KROME AVENUE  
HOMESTEAD, FL 33030 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	Title	AMBR
Name	GERMAIN, BRYAN ST.	Name	LAZZERI, JEFF
Address	505 N. KROME AVENUE	Address	505 N. KROME AVENUE
City-State-Zip:	HOMESTEAD FL 33030	City-State-Zip:	HOMESTEAD FL 33030

*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:** BRYAN ST.GERMAIN

AMBR

01/14/2021

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

\_\_\_\_\_ Date