

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000092506

**Entity Name:** 1717 NW 69 ST LLC

**Current Principal Place of Business:**

19 MIDWAY ISLAND,  
CLEARWATER BEACH, FL 33767

**Current Mailing Address:**

19 MIDWAY ISLAND,  
CLEARWATER BEACH, FL 33767

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

KABIRI, HAGAY  
19 MIDWAY ISLAND,  
CLEARWATER BEACH, FL 33767 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 KABIRI, HAGAY  
Address 19 MIDWAY ISLAND,  
City-State-Zip: CLEARWATER BEACH FL 33767

*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:** HAGAY KABIRI

MGR

04/30/2017

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

\_\_\_\_\_ Date