

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000089605

**Entity Name:** 912 VICTORIA, LLC

**Current Principal Place of Business:**

501 SW 2ND AVENUE  
SUITE A  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

501 SW 2ND AVENUE  
SUITE A  
FORT LAUDERDALE, FL 33301 US

**FEI Number:** 82-1299611

**Certificate of Status Desired:** No

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

DIFIORE, CHRISTINE  
14201 W SUNRISE BLVD  
201  
SUNRISE, FL 33323 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 BROMAN, DORON  
Address 3330 NORTH EAST 190TH STREET  
City-State-Zip: AVENTURA FL 33160

Title MGR  
Name BIBUS, CHRISTOPHER  
Address 17001 COLLINS AVENUE  
City-State-Zip: SUNNY ISLES FL 33160

*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:** DORON BROMAN

**MANAGER**

**01/14/2020**

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

\_\_\_\_\_  
Date