

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000180410

**Entity Name:** VENTURES OFFICE LLC

**Current Principal Place of Business:**

5959 COLLINS AVE APT 1006  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

1509 ISLAND WAY  
WESTON, FL 33326

**FEI Number:** 82-2630892

**Certificate of Status Desired:** No

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

PORTNOY, FRED  
1509 ISLAND WAY  
WESTON, FL 33326 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	Title	MGR
Name	PORTNOY, FRED	Name	NAGPAL, NARESH
Address	1509 ISLAND WAY	Address	5959 COLLINS AVE APT 1006
City-State-Zip:	WESTON FL 33326	City-State-Zip:	MIAMI BEACH FL 33140

Title AUTHORIZED REPRESENTATIVE  
Name KIRSCHNER, ANN  
Address 20503 KYLEMORE DRIVE  
City-State-Zip: STRONGSVILLE OH 44149

*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:** ANN KIRSCHNER

06/26/2018

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

\_\_\_\_\_ Date