

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000186423

**Entity Name:** MIAMI INTERNATIONAL TRAVELERS HOSTEL, LLC

**Current Principal Place of Business:**

1051 COLLINS AVE  
MIAMI BEACH, FL 33119

**Current Mailing Address:**

PO BOX 190897  
MIAMI BEACH, FL 33119

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

AVID, JACK  
920 COLLINS AVENUE  
MIAMI BEACH, FL 33139 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	MEMB	Title	MEMB
Name	AVID, JACK	Name	OVED, STEVEN
Address	920 COLLINS AVENUE	Address	138 E 31ST STREET - C1
City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	NEW YORK NY 10016

*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:** JACK AVID

**MANAGER**

**06/26/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date