

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000234412

**Entity Name:** 7765 SW 144TH ST, LLC

**Current Principal Place of Business:**

20256 OLD CUTLER ROAD  
CUTLER BAY, FL 33189

**Current Mailing Address:**

PO BOX 565340  
PINECREST, FL 33256

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

PUENTES, ANGELICA Y  
20256 OLD CUTLER ROAD  
CUTLER BAY, FL 33189 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	PUENTES, ANGELICA Y	Name	PUENTES, LEANDRO JR
Address	PO BOX 565340	Address	PO BOX 565340
City-State-Zip:	PINECREST FL 33256	City-State-Zip:	PINECREST FL 33256

*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:** ANGELICA Y PUENTES

**MGR**

**04/30/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date