

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000046935

**Entity Name:** 2800 ST. PETE RETAIL, LLC

**Current Principal Place of Business:**

11330 SW 23RD PL  
DAVIE, FL 33325

**Current Mailing Address:**

11330 SW 23RD PL  
DAVIE, FL 33325

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

JACOBSON, ADAM  
11330 SW 23RD PL  
DAVIE, FL 33325 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	AMBR	Title	AMBR
Name	BLAU, ROBERT	Name	JACOBSON, ADAM
Address	9030 W SAHARA STE 298	Address	11330 SW 23RD PL
City-State-Zip:	LAS VEGAS NV 89117	City-State-Zip:	DAVIE FL 33325

*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:** ADAM JACOBSON

**MANAGER**

**01/29/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date