

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000172067

**Entity Name:** CAPRI TOWER LLC

**Current Principal Place of Business:**

1111KANE CONCOURSE DRIVE  
SUITE-217  
BAY HARBOR ISLANDS, FL 33154

**Current Mailing Address:**

1111KANE CONCOURSE DRIVE  
SUITE-217  
BAY HARBOR ISLANDS, FL 33154 US

**FEI Number:** 83-1312023

**Certificate of Status Desired:** No

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

LOUIS A. SUPRASKI, P.A.  
16666 NE 19TH AVENUE  
SUITE-113  
NORTH MIAMI BEACH, FL 33162 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 BLUE ROAD LLC  
Address 1111 KANE CONCOURSE DRIVE  
SUITE-217  
City-State-Zip: BAY HARBOR ISLANDS FL 33154

*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:** BLUE ROAD LLC

MGR

03/21/2023

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

\_\_\_\_\_  
Date