

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000163017

**Entity Name:** GOLD COAST PREMIER PROPERTIES XII, LLC

**Current Principal Place of Business:**

16155 SW 117 AVENUE  
SUITE B2  
MIAMI, FL 33177

**Current Mailing Address:**

16155 SW 117 AVENUE  
SUITE B2  
MIAMI, FL 33177 US

**FEI Number:** 84-2248838

**Certificate of Status Desired:** No

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

GOLD COAST PREMIER MANAGEMENT, LLC  
16155 SW 117TH AVENUE  
SUITE B2  
MIAMI, FL 33177 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 MGRP  
Name GARCIA, RAUL  
Address 16155 SW 117 AVENUE, SUITE B2  
City-State-Zip: MIAMI FL 33177

Title MGRV  
Name GARCIA, VERONICA M  
Address 16155 SW 117 AVENUE, SUITE B2  
City-State-Zip: MIAMI FL 33177

Title VCFO  
Name LAM, WAISON  
Address 16155 SW 117 AVENUE, SUITE B2  
City-State-Zip: MIAMI FL 33177

Title COO  
Name GARCIA, VERONICA M  
Address 16155 SW 117 AVENUE, SUTIE B2  
City-State-Zip: MIAMI FL 33177

*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:** WAISON LAM

**CFO**

**03/09/2020**

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

\_\_\_\_\_  
Date