

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000333484

**Entity Name:** E.R.P.S. NY REALTY LLC

**Current Principal Place of Business:**

3901 SOUTH OCEAN DRIVE STE PH16  
HOLLYWOOD, FL 33019

**Current Mailing Address:**

3901 SOUTH OCEAN DRIVE STE PH16  
HOLLYWOOD, FL 33019 US

**FEI Number:** 47-2634785

**Certificate of Status Desired:** No

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

RIVKIN, ELEONORA  
3901 SOUTH OCEAN DRIVE STE PH16  
HOLLYWOOD, FL 33019 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            | RIVKIN, ELEONORA                | Name            | ABRAMOVA, TAMARA                |
| Address         | 3901 SOUTH OCEAN DRIVE STE PH16 | Address         | 3901 SOUTH OCEAN DRIVE STE PH16 |
| City-State-Zip: | HOLLYWOOD FL 33019              | City-State-Zip: | HOLLYWOOD FL 33019              |

*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:** ELEONORA RIVKIN

**MEMBER**

**04/23/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date