## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000052582

Entity Name: GABLES STRETCH, LLC

**Current Principal Place of Business:** 

3138 PONCE DE LEON BOULEVARD

CORAL GABLES. FL 33134

## **Current Mailing Address:**

3138 PONCE DE LEON BOULEVARD CORAL GABLES. FL 33134 US

FEI Number: 87-4746293 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MONTALTO, STEPHEN F 3138 PONCE DE LEON BOULEVARD CORAL GABLES, FL 33134 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

**FILED** Apr 02, 2025

**Secretary of State** 

3195995908CC

## Authorized Person(s) Detail:

Title MANAGER Title MANAGER

Address

MONTALTO, STEPHEN F Name

Name PEREZ, MONICA

3138 PONCE DE LEON BOULEVARD Address

3138 PONCE DE LEON BOULEVARD

City-State-Zip: CORAL GABLES FL 33134

City-State-Zip: CORAL GABLES FL 33134

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.