

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000012601

Entity Name: ADVANCED BIOMEDICAL CONSULTING, LLC

Current Principal Place of Business:

3235 FAIRFIELD AVE S, UNIT F
ST. PETERSBURG, FL 33712-1816

Current Mailing Address:

P.O BOX 76405
ST. PETERSBURG, FL 33734 US

FEI Number: 80-0021564

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEWIS, JENNIFER D
3663 BAYSHORE BLVD NE
ST. PETERSBURG, FL 33703 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 MGRM
Name LEWIS, JONATHAN M
Address 3663 BAYSHORE BLVD NE
City-State-Zip: ST PETERSBURG FL 33703

Title MGRM
Name LEWIS, JENNIFER D
Address 3663 BAYSHORE BLVD NE
City-State-Zip: ST PETERSBURG FL 33703

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: JENNIFER D LEWIS

**DIRECTOR BUSINESS
OPERATIONS**

01/12/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date