

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000007664

**Entity Name:** SOUTH TAMPA MEDICAL INVESTMENTS, LLC**Current Principal Place of Business:**214 KEAP STREET  
BROOKLYN, NY 11211**Current Mailing Address:**14499 N. DALE MABRY HWY., SUITE 200  
TAMPA, FL 33618 US**FEI Number:** 59-3722197**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**APPLETON, ERIC N  
1801 N HIGHLAND AVE  
TAMPA, FL 33602 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            | GROSZ, JUDITH     |
| Address         | 214 KEAP ST       |
| City-State-Zip: | BROOKLYN NY 11211 |

|                 |                   |
|-----------------|-------------------|
| Title           | MGR               |
| Name            | LEFKOWITZ, EDWARD |
| Address         | 5511 11TH AVE     |
| City-State-Zip: | BROOKLYN NY 11219 |

|                 |                   |
|-----------------|-------------------|
| Title           | MGR               |
| Name            | GOLD, HARRY       |
| Address         | 1745 45TH ST      |
| City-State-Zip: | BROOKLYN NY 11219 |

|                 |                               |
|-----------------|-------------------------------|
| Title           | MGR                           |
| Name            | LEFKOWITZ, MORRIS             |
| Address         | 570 BEDFORD AVENUE<br>APT #2B |
| City-State-Zip: | BROOKLYN NY 11211             |

|                 |                   |
|-----------------|-------------------|
| Title           | MGR               |
| Name            | SCHACHER, ROBERT  |
| Address         | 1670 50TH ST      |
| City-State-Zip: | BROOKLYN NY 11219 |

|                 |                   |
|-----------------|-------------------|
| Title           | MGR               |
| Name            | LEFKOWITZ, JACOB  |
| Address         | 125 TAYLOR ST     |
| City-State-Zip: | BROOKLYN NY 11211 |

*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:** MORRIS LEFKOWITZ**MGR****03/05/2018**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date