

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000017811

Entity Name: TAMPA CARDIO ASSOCIATES, L.L.C.

Current Principal Place of Business:

4600 NORTH HABANA, STE. 4
TAMPA, FL 33614

Current Mailing Address:

4600 NORTH HABANA, STE. 4
TAMPA, FL 33614

FEI Number: 90-0082685

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HUMBERTO, COTO MD
4600 N HABANA AVE
STE 4
TAMPA, FL 33614 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 CARDIAC CARE SERVICES, PA
Address 4600 NORTH HABANA STE 4
City-State-Zip: TAMPA FL 33614

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: HUMBERTO COTO

CEO

05/01/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date