

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000048228

Entity Name: FLEITES, HIRIART & LOPEZ, M.D., P.L.

Current Principal Place of Business:

9950 SW 107 AVE
101
MIAMI, FL 33176

Current Mailing Address:

9950 SW 107 AVE
101
MIAMI, FL 33176

FEI Number: 59-3773369

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLEITES, JORGE M.D.
9950 SW 107 AVE, SUITE 101
MIAMI, FL 33176 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 FLEITES, JORGE
Address 9950 SW 107 AVE STE 101
City-State-Zip: MIAMI FL 33176

Title MGRM
Name HIRIART, MARTIN S
Address 9950 SW 107 AVE, SUITE 101
City-State-Zip: MIAMI FL 33176

Title MGRM
Name LOPEZ, GUILLERMO R
Address 9950 SW 107 AVE, SUITE 101
City-State-Zip: MIAMI FL 33176

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: MARTIN S HIRIART

MANAGER

04/17/2015

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date