

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000018417

Entity Name: CARDIOLOGY ASSOCIATES OF MIAMI BEACH, PLLC

Current Principal Place of Business:

4302 ALTON ROAD
SUITE 1003
MIAMI BEACH, FL 33140

Current Mailing Address:

4302 ALTON ROAD
SUITE 1003
MIAMI BEACH, FL 33140 US

FEI Number: 20-2396250

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOWER, TANYA LESQ.
C/O TRIPP SCOTT, P.A.
110 SE 6TH STREET, 15TH FLOOR
FORT LAUDERDALE, FL 33301 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 MGR
Name VIVAS, PABLO HM.D.
Address 4302 ALTON ROAD, SUITE 1003
City-State-Zip: MIAMI BEACH FL 33140

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: PABLO H. VIVAS, MD

OFFICER

03/30/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date