

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000028865

Entity Name: PRECISION HEALTH CARE NEW YORK LLC

Current Principal Place of Business:

ONE SOUTH OCEAN BLVD.
SUITE 316
BOCA RATON, FL 33432

Current Mailing Address:

PO BOX 27-2505
BOCA RATON, FL 33427 US

FEI Number: 14-1926106

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KAISER, MARC R
ONE SOUTH OCEAN BLVD.
SUITE 316
BOCA RATON, FL 33432 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: MARC R. KAISER

04/26/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name KAISER, MARC R
Address ONE SOUTH OCEAN BLVD.
SUITE 316
City-State-Zip: BOCA RATON FL 33432

Title MGR
Name STRBA, BEVERLY S
Address ONE SOUTH OCEAN BLVD.
SUITE 316
City-State-Zip: BOCA RATON FL 33432

Title MGRM
Name PRECISION HEALTH CARE, INC.
Address ONE SOUTH OCEAN BLVD.
SUITE 316
City-State-Zip: BOCA RATON FL 33432

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: MARC KAISER

MGR

04/26/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date