

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000071120

**Entity Name:** PET MEDICAL CENTERS, LLC

**Current Principal Place of Business:**

19501 BISCAYNE BLVD, SUITE 400  
AVENTURA, FL 33180

**Current Mailing Address:**

2901 COLLINS AVE  
UNIT 1206  
MIAMI BEACH, FL 33140 US

**FEI Number:** 20-5250579

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

RAPPAPORT, JON  
2901 COLLINS AVE  
UNIT 1206  
MIAMI BEACH, FL 33140 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:** JON RAPPAPORT

04/25/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name RAPPAPORT, JON  
Address 2901 COLLINS AVE  
UNIT 1206  
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:** JON RAPPAPORT

PRESIDENT

04/25/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date