

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000074076

Entity Name: ALI A. BAZZI M.D., LLC

Current Principal Place of Business:

1700 NE 199 STREET
NORTH MIAMI BEACH, FL 33179

Current Mailing Address:

1700 NE 199 STREET
NORTH MIAMI BEACH, FL 33179

FEI Number: 20-5286176

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAZZI, ALI A
1700 NE 199 STREET
NORTH MIAMI BEACH, FL 33179 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 BAZZI, ALI A
Address 1700 NE 199 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title MGRM
Name BAZZI, BATOUL
Address 1700 NE 199 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

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: ALI A BAZZI

MGR

01/16/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date