

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000088461

**Entity Name:** NEPHRON PARTNERS, P.L.

**Current Principal Place of Business:**

9000 SW 87 CT., STE. 215  
MIAMI, FL 33176

**Current Mailing Address:**

POB 562121  
MIAMI, FL 33256

**FEI Number:** 26-3392828

**Certificate of Status Desired:** Yes

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

GREEN, MITCHELL F.  
4000 HOLLYWOOD BLVD., STE. 485  
HOLLYWOOD, FL 33021 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 LOEWENHERZ, JAMES W.  
Address 9000 SW 87 CT., STE. 215  
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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LOEWENHERZ, JAMES W.

MGR

03/20/2013

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date