## **2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000021269

Entity Name: HEART CARE PLUS, LLC

**Current Principal Place of Business:** 

2733 PONCE DE LEON BLVD. CORAL GABLES. FL 33134

**Current Mailing Address:** 

2733 PONCE DE LEON BLVD. CORAL GABLES, FL 33134

FEI Number: 27-2022147 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARGUELLES, MARIA V 2733 PONCE DE LEON BLVD CORAL GABLES, FL 33134 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

FILED Apr 01, 2013

**Secretary of State** 

CC4260074989

## Authorized Person(s) Detail:

Title MGR

Name DONATO J. ARGUELLES, MD, PA
Address 2733 PONCE DE LEON BLVD.
City-State-Zip: CORAL GABLES FL 33134

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: MARIA V ARGUELLES

VICE PRESIDENT

04/01/2013