

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000072321

**Entity Name:** DTECH MEDICAL SOLUTIONS, LLC

**Current Principal Place of Business:**

50 BISCAYNE BLVD.  
APT. 4301  
MIAMI, FL 33132

**Current Mailing Address:**

50 BISCAYNE BLVD.  
APT. 4301  
MIAMI, FL 33132 US

**FEI Number:** 45-2588639

**Certificate of Status Desired:** No

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

CESAR, DANIEL  
10753 SW 104TH ST  
MIAMI, FL 33176 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:** DANIEL CESAR

03/21/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MILLER, MARIANA A  
Address 50 BISCAYNE BLVD  
4301  
City-State-Zip: MIAMI FL 33132

*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:** MARIANA MILLER

MANAGER

03/21/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date