

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000080810

Entity Name: NEUROTRACE DIAGNOSTIC SERVICES L.L.C.

Current Principal Place of Business:

3104 N ARMENIA AVE
#4
TAMPA, FL 33607

Current Mailing Address:

3104 N ARMENIA AVE STE #4
TAMPA, FL 33611

FEI Number: 90-0749515

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEYBY FERREIRA
3408 W VILLA ROSA ST
TAMPA, FL 33611 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 CEO
Name FERREIRA, DEYBY
Address 3408 W VILLA ROSA ST
City-State-Zip: TAMPA FL 33611

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: DEYBY FERREIRA

CEO

04/23/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date