# 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000098604

Entity Name: RUSHMORE MEDICAL GROUP, LLC.

### **Current Principal Place of Business:**

1217 WEST 44TH PL HIALEAH, FL 33012

# **Current Mailing Address:**

1217 WEST 44TH PL HIALEAH, FL 33012 US

# FEI Number: 45-3100565

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

ANDREU, DAVID 1217 WEST 44TH PL HIALEAH, FL 33012 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

### Authorized Person(s) Detail :

Title	MGR	Title	MGRM
Name	ANDREU, DAVID	Name	GOMEZ, IVET M
Address	1217 WEST 44TH PLACE	Address	5369 WEST 23RD AVE
City-State-Zip:	HIALEAH FL 33012	City-State-Zip:	HIALEAH FL 33016

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: DAVID ANDREU

MGR

03/25/2013 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 25, 2013 Secretary of State CC3680736082

Certificate of Status Desired: No

Date