## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000100507

Entity Name: GIANMARCO PARIS, M.D., LLC

**Current Principal Place of Business:** 

15040 SW 40 STREET DAVIE, FL 33331

**Current Mailing Address:** 

15040 SW 40 STREET DAVIE, FL 33331 US

FEI Number: 45-3154597 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARIS, GIANMARCO R 15040 SW 40 STREET DAVIE, FL 33331 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 15, 2013

**Secretary of State** 

CC1847329375

## Authorized Person(s) Detail:

Title MGRM

Name PARIS, GIANMARCO R
Address 15040 SW 40 STREET
City-State-Zip: DAVIE FL 33331

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: GIANMARCO PARIS

MEMBER

04/15/2013

Date