

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000099792

**Entity Name:** JM CLINICAL RESEARCH LLC

**Current Principal Place of Business:**

7000 SW 62 AVENUE  
SUITE 590  
MIAMI, FL 33143

**Current Mailing Address:**

P O BOX 223187  
HOLLYWOOD, FL 33022

**FEI Number:** 46-0706056

**Certificate of Status Desired:** No

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

NARANJO, LUZ E  
1230 HATTERAS LANE  
HOLLYWOOD, FL 33019 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:** LUZ E NARANJO

01/15/2014

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGRM
Name	NARANJO, JULIAN F	Name	VELASCO, MAXIMILIANO
Address	P O BOX 223187	Address	P O BOX 223187
City-State-Zip:	HOLLYWOOD FL 33019	City-State-Zip:	HOLLYWOOD FL 33022

*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:** JULIAN F NARANJO

MGR

01/15/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date