

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000123219

Entity Name: LA ALIANZA MEDICAL CENTER 1 LLC

Current Principal Place of Business:

8530 SW 8 STREET;
MIAMI, FL 33144

Current Mailing Address:

8530 SW 8 STREET;
MIAMI, FL 33144

FEI Number: 46-1075901

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARRERAS RISECH, JOSE GMD
9822 SW 27 TERRACE
MIAMI, FL 33165 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 MGR
Name CARRERAS RISECH, JOSE GMD
Address 8530 SW 8TH STREET
City-State-Zip: MIAMI FL 33144

Title MGR
Name VELASCO, NESTOR
Address 8530 SW 8TH STREET
City-State-Zip: MIAMI FL 33144

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: NESTOR VELASCO

MGMR

01/14/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date