

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000000590

Entity Name: 3625 QP PARTNERS LLC

Current Principal Place of Business:

3625 QUEEN PALM DRIVE
TAMPA, FL 33619

Current Mailing Address:

546 ROUTE 46 W
TETERBORO, NJ 07608

FEI Number: 46-1653757

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE CENTER FOR ALLIED HEALTH & NURSING ED
10126 WINDHORST RD.
TAMPA, FL 33619 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 MGRM
Name KARZHEVSKY, GREG
Address 25 VALENZA LANE
City-State-Zip: BLAUVELT NY 10913

Title MGRM
Name LITVACK, STEVEN
Address 85 HEATHER DRIVE
City-State-Zip: ROSLYN NY 11576

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: GREG KARZHEVSKY

MANAGING MEMBER

07/08/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date