

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000005687

**Entity Name:** FIRST CHOICE RECOVERY DORAL LLC

**Current Principal Place of Business:**

2020 NE 163RD ST  
300  
NORTH MIAMI BEACH, FL 33162

**Current Mailing Address:**

PO BOX 523484  
MIAMI, FL 33152

**FEI Number:** 46-1746744

**Certificate of Status Desired:** No

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

ULOWICZ, EUGENIO  
2020 NE 163RD ST  
300  
NORTH MIAMI BEACH, FL 33162 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:** EUGENIO ULOWICZ

04/30/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ULOWICZ, EUGENIO  
Address 2020 NE 163RD ST # 300  
City-State-Zip: NORTH MIAMI BEACH FL 33162

*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:** EUGENIO ULOWICZ

MGR

04/30/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date