

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000060574

Entity Name: TAMPA VEIN AND VASCULAR INSTITUTE, PLC

Current Principal Place of Business:

3010 E 138TH AVE.
SUITE 12
TAMPA, FL 33613

Current Mailing Address:

3010 E 138TH AVE.
SUITE 12
TAMPA, FL 33613

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAWAR, ASAD
3010 E 138TH AVE.
SUITE 12
TAMPA, FL 33613 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 SAWAR, ASAD
Address 16338 BURNISTON DR.
City-State-Zip: TAMPA FL 33647

Title MGRM
Name MARQUES, VASCO
Address 4902 LONDONDERRY DR.
City-State-Zip: TAMPA FL 33647

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: VASCO MARQUES

MGRM

02/09/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date