

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000061144

**Entity Name:** U.S. RADIOLOGY OF FLORIDA LLC

**Current Principal Place of Business:**

13145 SW 28 COURT  
DAVIE, FL 33330

**Current Mailing Address:**

13145 SW 28 COURT  
DAVIE, FL 33330 US

**FEI Number:** 46-2690394

**Certificate of Status Desired:** No

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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	Title	S
Name	CABRERA, MIGUEL	Name	CABRERA, DONNA
Address	13145 SW 28 COURT	Address	13145 SW 28 COURT
City-State-Zip:	DAVIE FL 33330	City-State-Zip:	DAVIE FL 33330

*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:** MIGUEL CABRERA

**MANAGING PARTNER**

**04/21/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date