## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000075731

Entity Name: PHYCORE MEDICAL RESEARCH LLC

**Current Principal Place of Business:** 

8866 DARLENE DRIVE ORLANDO. FL 32836

**Current Mailing Address:** 

8866 DARLENE DRIVE ORLANDO, FL 32836 US

FEI Number: 46-3051038 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASMA & ASMA PA 884 S DILLARD STREET WINTER GARDEN, FL 34787 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: C NICK ASMA 04/13/2017

Electronic Signature of Registered Agent

Date

FILED Apr 13, 2017

**Secretary of State** 

CC5831099720

Authorized Person(s) Detail:

Title MGR Title MGR

NameKHAN, MUHAMMAD ANameKHAN, JENNIFER HAddress8866 DARLENE DRIVEAddress8866 DARLENE DRIVECity-State-Zip:ORLANDO FL 32836City-State-Zip:ORLANDO FL 32836

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: MUHAMMAD A. KHAN

Electronic Signature of Signing Authorized Person(s) Detail

**MGR** 

04/13/2017