2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000144453

Entity Name: PIONEER MEDICAL GROUP, LLC

Current Principal Place of Business:

13067 N TELECOM PKWY TAMPA. FL 33637

Current Mailing Address:

13067 N TELECOM PKWY TAMPA, FL 33637 US

FEI Number: 46-3979554 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALI, SYED I 13067 N TELECOM PKWY TAMPA, FL 33637 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:

Name

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

RM INGENUITY

Title MBR Title MBR

NameBALLMONT LLCNameMILSAN GROUP LLCAddress17324 BALLMONT PARK DRIVEAddress10555 CORY LAKE DRIVE

City-State-Zip: ODESSA FL 33556 City-State-Zip: TAMPA FL 33647

Title MBR Title MGR

NameMASOOD HK LLCNameDR DIPTI MEHTA INCAddress20114 NATURES HIKE WAYAddress4201 BAYSHORE BLVD

#1901

City-State-Zip: TAMPA FL 33647 City-State-Zip: TAMPA FL 33611

Title MBR Title MBR

Address 30595 IVY FORGE CT Name SOLARA HEALTHCARE LLC
Address 10528 MARTINIQUE ISLE DR

City-State-Zip: WESLEY CHAPEL FL 33543 City-State-Zip: TAMPA FL 33647

Title AMG HEALTH LLC Title KHDZ MEDICAL PLLC

Name AMG HEALTH LLC Name KHDZ MEDICAL PLLC

Address 28638 CORBORA PLACE Address 10103 GARDEN RETREAT CT

City-State-Zip: WESLEY CHAPEL FL 33543 City-State-Zip: TAMPA FL 33647

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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: SYED ALI MEMBER 04/24/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Apr 24, 2025

Secretary of State

2535109598CC

Date

Authorized Person(s) Detail Continued:

TitleTWINSTAR LLCTitleNARSING RAO MD PANameTWINSTAR LLCNameNARSING RAO MD PAAddress30246 SOUTHERNWOOD CTAddress2835 SW 117TH ST

City-State-Zip: WESLEY CHAPEL FL 33543 City-State-Zip: GAINESVILLE FL 32608

TitleADANYA PLLCTitleKALPESH PATEL MD LLCNameADANYA PLLCNameKALPESH PATEL MD LLCAddress14907 OLD TOM MORRIS CTAddress17922 HOWSMOOR PL

City-State-Zip: TAMPA FL 33626 City-State-Zip: LUTZ FL 33559