

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000000531

Entity Name: PINES CARE RESEARCH CENTER, LLC

Current Principal Place of Business:

10011 PINES BLVD
SUITE 203
PEMBROKE PINES, FL 33024

Current Mailing Address:

6520 SW 181 LN
SW RANCHES, FL 33331 US

FEI Number: 46-4642873

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PRIDA, KAREN
10011 PINES BLVD
SUITE 203
PEMBROKE PINES, FL 33024 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	Title	MGR
Name	PRIDA, KAREN	Name	MOYA, JAYNIER
Address	10011 PINES BLVD SUITE 203	Address	10011 PINES BLVD SUITE 203
City-State-Zip:	PEMBROKE PINES FL 33024	City-State-Zip:	PEMBROKE PINES FL 33024

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: KAREN PRIDA _____

MANAGER

03/20/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date