

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000061914

Entity Name: DIALYSIS TRAINING CENTER OF AMERICA, LLC

Current Principal Place of Business:

1745 EAST HALLANDALE BEACH BLVD
APT. 1407
HALLANDALE BEACH, FL 33009

Current Mailing Address:

1745 EAST HALLANDALE BEACH BLVD
APT. 1407
HALLANDALE BEACH, FL 33009

FEI Number: 46-5493018

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLECKER, DAVID L MD
1745 E. HALLANDALE BEACH BLVD
APT. 1407
HALLANDALE BEACH, FL 33009 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 MBR
Name BLECKER, DAVID L MD
Address 1745 E. HALLANDALE BEACH BLVD
APT. 1407
City-State-Zip: HALLANDALE BEACH FL 33009

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: DAVID L BLECKER

MBR

03/02/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date