

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000114804

Entity Name: INTERNATIONAL URGENT CARE & MINIMALLY INVASIVE
SURGERY CENTER, LLC

Current Principal Place of Business:

6515 COLLINS AVENUE
UNIT 1807
MIAMI BEACH, FL 33141

Current Mailing Address:

P O BOX 190844
MIAMI BEACH, FL 33139 US

FEI Number: 32-0445467

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALLAN KOLTUN CPA PA
1900 N BAYSHORE DRIVE
1A
MIAMI, FL 33132 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
Name FAZILAT, BAHAREH MD
Address 6515 COLLINS AVENUE UNIT 1807
City-State-Zip: MIAMI BEACH FL 33141

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: FAZILAT , BAHAREH , MD

MNGR

02/18/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date