

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000194152

Entity Name: CAREVANTAGE INTERNATIONAL MEDICAL SERVICES LLC

Current Principal Place of Business:

444 BRICKELL AVE
760
MIAMI, FL 33131

Current Mailing Address:

444 BRICKELL AVE
760
MIAMI, FL 33131

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAFAEL E. SOSA, P.A.
3971 SW 8TH STREET
305
MIAMI, FL 33134 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 THORNE, ROBERT
Address 444 BRICKELL AVE, 760
City-State-Zip: MIAMI FL 33131

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: ROBERT THORNE

MGR

04/30/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date