2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000068283

Entity Name: ELITE MEDICAL, PLLC

Current Principal Place of Business:

4905 WEST LAUREL STREET

SUITE 202 TAMPA, FL 33607

Current Mailing Address:

P.O.BOX 21268 TAMPA, FL 33622 US

FEI Number: 47-3765288 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KEITH M. HANENIAN, P.A. 4905 WEST LAUREL STREET SUITE 200 TAMPA, FL 33607 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: KEITH M. HANENIAN 02/08/2019

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title PRESIDENT Title VI

NameHANENIAN, KRISTEN SNameHANENIAN, KEITH MAddressP.O.BOX 21268AddressP.O.BOX 21268City-State-Zip:TAMPA FL 33622City-State-Zip:TAMPA FL 33622

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.

FILED Feb 08, 2019

Secretary of State

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