

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000157255

**Entity Name:** HEALTH VENDORS LLC

**Current Principal Place of Business:**

1100 BRICKELL BAY DR #310121  
MIAMI, FL 33231

**Current Mailing Address:**

P.O. BOX 310121  
MIAMI, FL 33231 US

**FEI Number:** 47-5095049

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BONET, EDUARDO  
1060 BRICKELL AVE  
4103  
MIAMI, FL 33131 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:** EDUARDO BONET

01/19/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	AMBR	Title	AMBR
Name	BONET, EDUARDO	Name	CARNICERO JR., JUAN R
Address	1060 BRICKELL AVE 4103	Address	10213 SW 21 TERR
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33165

*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:** EDUARDO BONET

CEO

01/19/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date