

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000208749

Entity Name: NIRVANA ACUPUNCTURE & MEDICAL CENTER, LLC

Current Principal Place of Business:

5002 S MACDILL AVE
TAMPA, FL 33611

Current Mailing Address:

5002 S MACDILL AVE
TAMPA, FL 33611 US

FEI Number: 81-1106457

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARTER, SANDRA
5002 S MACDILL AVE
TAMPA, FL 33611 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 CARTER, SANDRA
Address 5002 S MACDILL AVE
City-State-Zip: TAMPA FL 33611

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: SANDRA CARTER

MGR

04/26/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date