

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000209544

**Entity Name:** PUSH HARD CPR, LLC

**Current Principal Place of Business:**

17515 NW 67TH COURT  
APT F  
HIALEAH, FL 33015

**Current Mailing Address:**

17515 NW 67TH COURT  
APT F  
HIALEAH, FL 33015 US

**FEI Number:** 81-4448510

**Certificate of Status Desired:** Yes

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

FERNANDEZ, GABRIEL  
17515 NW 67TH COURT  
APT F  
HIALEAH, FL 33015 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:** GABRIEL FERNANDEZ

01/14/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name FERNANDEZ, GABRIEL  
Address 17515 NW 67TH COURT  
APT F  
City-State-Zip: HIALEAH FL 33015

*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:** GABRIEL FERNANDEZ

MANAGER

01/14/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date