#### 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000118908

Entity Name: INTEGRAL - CLINICAL TRIALS SOLUTIONS, LLC

**FILED** Apr 28, 2022 **Secretary of State** 3778898305CC

# **Current Principal Place of Business:**

700 N HIATUS ROAD SUITE 213

PEMBROKE PINES, FL 33026

# **Current Mailing Address:**

120 LAKEVIEW DR. **APT 204** WESTON, FL 33326 US

FEI Number: 83-0547834 Certificate of Status Desired: No

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

VILORIA, ALEJANDRO MR 120 LAKÉVIEW DR. **APT 204** WESTON, FL 33326 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 **AMBR** 

Name VILORIA, ALEJANDRO 120 LAKEVIEW DR. APT 204 Address

City-State-Zip: WESTON 33326

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.

Electronic Signature of Signing Authorized Person(s) Detail