

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000172816

**Entity Name:** AMERIPRO EMS OF FLORIDA, LLC

**Current Principal Place of Business:**

4810 EXECUTIVE PARK CT STE 112  
JACKSONVILLE, FL 32216

**Current Mailing Address:**

4810 EXECUTIVE PARK CT STE 112  
JACKSONVILLE, FL 32216

**FEI Number:** 84-2463457

**Certificate of Status Desired:** Yes

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

CAPITOL CORPORATE SERVICES, INC.  
515 E PARK AVE 2ND FLOOR  
TALLAHASSEE, FL 32301 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            AMERIPRO EMS LLC  
Address        4810 EXECUTIVE PARK CT STE 112  
City-State-Zip: JACKSONVILLE FL 32216

*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:** SUHAS UPPALAPATI

CEO

04/05/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date