

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000029083

Entity Name: DOCTOR PETRUS LLC

Current Principal Place of Business:

150 SE 2ND AVE
UNIT 1402
MIAMI, FL 33131

Current Mailing Address:

150 SE 2ND AVE
UNIT 1402
MIAMI, FL 33131 US

FEI Number: 61-1956207

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TAXCARE SOUTH MIAMI
150 SE 2ND AVE
UNIT 1402
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: CORINA A. SMITH

01/31/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name DI MASE ZINGG, EGLANTINA
Address 17878 NORTH BAY RD
APT 603
City-State-Zip: SUNNY ISLES FL 33160

Title CFO
Name CARRILLO, LUISANA
Address 150 SE 2ND AVE
UNIT 1402
City-State-Zip: MIAMI FL 33131

Title MANAGER
Name BAKHOS HASKOUR, ANTONIO C
Address 1441 WEST 23RD STREET
City-State-Zip: MIAMI BEACH FL 33140

Title MANAGER
Name MONSALVE, BORIS
Address 455 BRICKELL AVE APT 4003
City-State-Zip: MIAMI FL 33131

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: EGLANTINA DI MASE ZINGG

MANAGER

01/31/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date