

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000029083

Entity Name: DOCTOR PETRUS LLC

Current Principal Place of Business:

1400 NW 107TH AVENUE
STE 203
MIAMI, FL 33172

Current Mailing Address:

1400 NW 107TH AVENUE
STE 203
MIAMI, FL 33172 US

FEI Number: 61-1956207

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TAXCARE SOUTH MIAMI
1400 NW 107TH AVENUE
STE 203
MIAMI, FL 33172 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

01/05/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name EGLANTINA DI MASE ZINGG
Address 8528 NW 108 CT
City-State-Zip: MIAMI FL 33178

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

Title MANAGER
Name ABREU LINAREZ, LUIS A
Address 1400 NW 107TH AVENUE
 STE 203
City-State-Zip: MIAMI FL 33172

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: LUIS A. ABREU LINAREZ

MANAGER

01/05/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date