

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000037239

Entity Name: ADMINISTRATION INTERNATIONAL MEDICAL SERVICES, LLC**Current Principal Place of Business:**4430 SW 83RD AVE
MIAMI, FL 33155**Current Mailing Address:**1825 PONCE DE LEON BLVD STE 500
CORAL GABLES, FL 33134 US**FEI Number:** 84-4677196**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SOSA, JOAQUIN A
12511 SW 9TH STREET
MIAMI, FL 33184 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 PEREZ, HECTOR J.
Address 4430 SW 83RD AVE
City-State-Zip: MIAMI FL 33155

Title MGR, AR
Name JAS. LAW, LLC
Address 1825 PONCE DE LEON BLVD STE 500
City-State-Zip: CORAL GABLES FL 33134

Title AMBR
Name H & M INTERNATIONAL MEDICAL SERVICES, LLC
Address 4430 SW 83RD AVE
City-State-Zip: MIAMI FL 33155

Title MGR
Name SOSA, JOAQUIN A.
Address 1825 PONCE DE LEON BLVD #500
City-State-Zip: CORAL GABLES FL 33134

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: JOAQUIN A. SOSA**REGISTERED AGENT &
AR****01/25/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date