

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000093247

**Entity Name:** PMG INPATIENT SERVICES LLC

**Current Principal Place of Business:**

5101 BRITTANY DR S  
SAINT PETERSBURG, FL 33715

**Current Mailing Address:**

200 2ND AVENUE SOUTH #781  
SAINT PETERSBURG, FL 33701

**FEI Number:** 83-3044320

**Certificate of Status Desired:** No

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

PRAWER, ADAM  
272 BAYVIEW DRIVE NE  
SAINT PETERSBURG, FL 33704 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 MD  
Name PRAWER, ADAM  
Address 5101 BRITTANY DR S  
City-State-Zip: SAINT PETERSBURG FL 33715

*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:** ADAM PRAWER

02/03/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date