

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000269322

**Entity Name:** EAST COAST HEALTHCARE LLC

**Current Principal Place of Business:**

510 VONDERBURG DR STE 305  
BRANDON, FL 33511

**Current Mailing Address:**

2483 CONEY ISLAND AVE  
LOWER LEVEL  
BROOKLYN, NY 11223 US

**FEI Number:** 86-1901987

**Certificate of Status Desired:** No

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

KOSYAKOVSKIY, STAN  
510 VONDERBURG DR STE 305  
BRANDON, FL 33511 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            MARKIAN HOLDINGS INC  
Address        3001 S OCEAN DR APT 339  
City-State-Zip: HOLLYWOOD FL 33019

*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:** MARKIAN HOLDINGS INC

**OWNER**

**01/30/2023**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date