

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000006325

**Entity Name:** SWISS MEDICA USA LLC

**Current Principal Place of Business:**

2999 NE 191 ST.  
STE #907  
AVENTURA, FL 33180

**Current Mailing Address:**

2999 NE 191 ST.  
STE #907  
AVENTURA, FL 33180

**FEI Number:** 61-2021713

**Certificate of Status Desired:** No

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

FINCOM GROUP USA INC  
2999 NE 191 ST.  
STE #907  
AVENTURA, FL 33180 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:** ANNA KROVIAKOVA

04/26/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MBR  
Name VOROBEB, VASILY  
Address 2999 NE 191 ST. STE #907  
City-State-Zip: AVENTURA FL 33180

*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:** VASILY VOROBEB

MBR

04/26/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date