

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L98000000198

**Entity Name:** SERGIO J. CABRERA, M.D., P.L.

**Current Principal Place of Business:**

4100 S FERDON BLVD  
A4  
CRESTVIEW, FL 32536

**Current Mailing Address:**

4100 S FERDON BLVD  
SUITE A4  
CRESTVIEW, FL 32536

**FEI Number:** 59-3492937

**Certificate of Status Desired:** No

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

CABRERA, SERGIO JMD  
4100 S FERDON BLVD  
SUITE A4  
CRESTVIEW, FL 32536 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 MGR  
Name CABRERA, SERGIO JMD  
Address 4100 S FERDON BLVD.  
City-State-Zip: CRESTVIEW FL 32536

*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:** SERGIO J CABRERA

**OWNER**

**02/19/2015**

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

\_\_\_\_\_  
Date