

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000097827

Entity Name: INVESCLINIC, LLC.

FILED
Mar 25, 2012
Secretary of State

Current Principal Place of Business:

9999 SUMMERBREEZE DR #818
SUNRISE, FL 33322 UN

New Principal Place of Business:

4401 N ANDREWS AVE
OAKLAND PARK, FL 33309 UN

Current Mailing Address:

9999 SUMMERBREEZE DR APT 818
SUNRISE, FL 33322 UN

New Mailing Address:

4401 N ANDREWS AVE
OAKLAND PARK, FL 33309 UN

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARIAS INCOME TAX & ACCOUNTING SERVICES
4693 NW 199 STREET
MIAMI GARDENS, FL 33055 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: CASANOVA, RENE
Address: 4401 N ANDREWS AVE
City-St-Zip: OAKLAND PARK, FL 33309 UN

Title: MGR
Name: ZAMBRANO, RICARDO
Address: 4401 N ANDREWS AVE
City-St-Zip: OAKLAND PARK, FL 33309 UN

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: RICARDO ZAMBRANO

MGR

03/25/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date