

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000060258

**FILED**  
**Jan 25, 2012**  
**Secretary of State**

**Entity Name:** VICTOR LOPEZ DE MENDOZA, M.D., PLLC

**Current Principal Place of Business:**

5381 NW 170 TR  
MIAMI GARDENS, FL 33055

**New Principal Place of Business:**

**Current Mailing Address:**

5381 NW 170 TR  
MIAMI GARDENS, FL 33055

**New Mailing Address:**

**FEI Number:** 27-2969038

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THE MEDILAW FIRM  
2100 PONCE DE LEON BLVD  
SUITE 1000  
CORAL GABLES, FL 33134 US

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

THE MEDILAW FIRM  
325 ALMERIA AVENUE  
CORAL GABLES, FL 33134 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: MAX A ADAMS ESQ

01/25/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: DIR  
Name: LOPEZ DE MENDOZA, VICTOR  
Address: 5381 NW 170 TR  
City-St-Zip: MIAMI GARDENS, FL 33055

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: VICTOR LOPEZ DE MENDOZA

DIR

01/25/2012

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