2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2015
Secretary of State
CC0939726696

DOCUMENT# P14000076165

Entity Name: LAL HEALTHCARE & RISK MANAGEMENT SERVICES, P.A.

Current Principal Place of Business:

6383 JACK RABBIT LANE
MIAMI LAKES, FL 33014

Current Mailing Address:

P.O. BOX 5317
HIALEAH, FL 33014

FEI Number: 47-1845823

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PANAGOS & ASSOCIATES CPAS LLC
2893 EXECUTIVE PARK DRIVE
SUITE 102
WESTON, FL 33331 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

Officer/Director Detail :

Title	P
Name	LEYVA, LAURA A
Address	6383 JACK RABBIT LANE
City-State-Zip:	MIAMI LAKES FL 33014

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LAURA A LEYVA P 03/30/2015

Electronic Signature of Signing Officer/Director Detail — Date