

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000018840

Entity Name: VARADERO MEDICAL CENTER OF MIAMI, LLC

Current Principal Place of Business:

5850 W. FLAGLER STREET
MIAMI, FL 33144

Current Mailing Address:

5850 W. FLAGLER STREET
MIAMI, FL 33144

FEI Number: 43-2018393

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARO, PEDRO R
5850 W. FLAGLER STREET
MIAMI, FL 33144 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 CARO, PEDRO R
Address 5850 W. FLAGLER STREET
City-State-Zip: MIAMI FL 33144

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: PEDRO R. CARO

PRESIDENT

03/20/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date