

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000086600

**Entity Name:** FRANCISCO C. PARRA M.D., LLC

**Current Principal Place of Business:**

1971 NW 33RD AVENUE  
MIAMI, FL 33125

**Current Mailing Address:**

PO BOX 1061  
MANATI, PR 00674-1061 US

**FEI Number:** 20-5480493

**Certificate of Status Desired:** Yes

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

GARCIA, INGER M  
3389 SHERIDAN STREET  
546  
HOLLYWOOD, FL 33021 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 PARRA, FRANCISCO C  
Address 1971 NW 33RD AVENUE  
City-State-Zip: MIAMI FL 33125

*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:** FRANCISCO C PARRA

**MANAGER**

**04/25/2024**

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

\_\_\_\_\_  
Date