

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000099351

Entity Name: BROWARD CLINICAL INVESTIGATION, LLC

Current Principal Place of Business:

8430 W BROWARD BOULEVARD
SUITE 300
PLANTATION, FL 33324

Current Mailing Address:

8430 W BROWARD BOULEVARD
SUITE 300
PLANTATION, FL 33324

FEI Number: 26-1240250

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEULOFEUT, HAROLD
8430 W BROWARD BOULEVARD
SUITE 300
PLANTATION, FL 33324 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 MGRM
Name CHILDREN'S MEDICAL ASSOCIATION,
P.A.
Address 8430 W BROWARD BOULEVARD,
SUITE 300
City-State-Zip: PLANTATION FL 33324

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: MARCO LEON

04/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date