## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L09000103697

Entity Name: JUAN CARLOS ACEVEDO-CRESPO, M.D. PULMONARY PRACTICE, LLC

## Current Principal Place of Business:

8600 S.W. 92ND STREET SUITE 204A MIAMI, FL 33156

# **Current Mailing Address:**

8600 S.W. 92ND STREET SUITE 204A MIAMI, FL 33156 US

# FEI Number: 27-1216443

### Name and Address of Current Registered Agent:

QUINTANA, VILMA 8600 S.W. 92ND STREET SUITE 204A MIAMI, FL 33156 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

### Authorized Person(s) Detail :

Title	MANAGER
Name	GONZALEZ, HUGO DR.
Address	8600 S.W. 92ND STREET SUITE 204A
City-State-Zip:	MIAMI FL 33156

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: HUGO GONZALEZ

MANAGER

02/17/2016

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 17, 2016 Secretary of State CC3130998378

Certificate of Status Desired: No

Date

Date