

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000001743

Entity Name: PASADENA CENTER FOR MEDICAL RESEARCH, LLC.

Current Principal Place of Business:

5454 CENTRAL AVE N.
SUITE A
ST. PETERSBURG, FL 33707

Current Mailing Address:

5454 CENTRAL AVE
SUITE A
ST. PETERSBURG, FL 33707 US

FEI Number: 27-1626663

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOHAMED, ALI
5454 CENTRAL AVE
SUITE A
ST. PETERSBURG, FL 33707 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 ALI, MOHAMED
Address 5454 CENTRAL AVE
SUITE A
City-State-Zip: ST. PETERSBURG FL 33707

Title MGRM
Name ALRABAA, SALLY
Address 5454 CENTRAL AVE
SUITE A
City-State-Zip: ST. PETERSBURG FL 33707

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: MOHAMED ALI

OWNER

03/01/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date