

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000038034

Entity Name: THE CLINICAL RESEARCH INSTITUTE LLC

Current Principal Place of Business:

15577 NW 83 CT
MIAMI LAKES, FL 33016

Current Mailing Address:

15577 NW 83 CT
MIAMI LAKES, FL 33016 US

FEI Number: 27-2355559

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARCIA, REBECA MGR
15577 NW 83 CT
MIAMI LAKES, FL 33016 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: REBECA GARCIA

04/29/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name GARCIA, REBECA
Address 15577 NW 83 CT
City-State-Zip: MIAMI LAKES FL 33016

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: REBECA GARCIA

MGR

04/29/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date