

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000051195

Entity Name: NIRIT R SWERDLOFF MD PROFESSIONAL LLC

Current Principal Place of Business:

5012 CHARDONNAY DRIVE
CORAL SPRINGS, FL 33067

Current Mailing Address:

5012 CHARDONNAY DRIVE
CORAL SPRINGS, FL 33067

FEI Number: 27-2559598

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SWERDLOFF, NIRIT R
5012 CHARDONNAY DRIVE
CORAL SPRINGS, FL 33067 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 SWERDLOFF, NIRIT R
Address 5012 CHARDONNAY DRIVE
City-State-Zip: CORAL SPRINGS FL 33067

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: NIRIT R. SWERDLOFF

MGRM

01/16/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date