#### 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000080337

Entity Name: UROLOGY PROFESSIONALS OF SOUTH FLORIDA LLC

FILED
Jan 29, 2020
Secretary of State
0203107951CC

## **Current Principal Place of Business:**

3700 WASHINGTON ST STE 104 HOLLYWOOD. FL 33021-8291

# **Current Mailing Address:**

3700 WASHINGTON ST STE 104 HOLLYWOOD, FL 33021-8291 US

FEI Number: 27-3147529 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

HASFORD, MATTHEW KOBINA 18000 SW 57TH STREET SOUTHWEST RANCHES, FL 33331 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 HASFORD, MATTHEW K
Address 18000 SW 57TH STREET

City-State-Zip: SOUTHWEST RANCHES FL 33331

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.

Electronic Signature of Signing Authorized Person(s) Detail