

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000004017

**Entity Name:** CENTRUM HCIT,LLC

**Current Principal Place of Business:**

1 SW 129TH AVE, STE 304  
PEMBROKE PINES, FL 33027

**Current Mailing Address:**

1 SW 129TH AVE, STE 304  
PEMBROKE PINES, FL 33027 US

**FEI Number:** 45-2651503

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JONATHAN H. GREEN & ASSOCIATES, P.A  
901 PONCE DE LEON BOULEVARD  
SUITE 601  
CORAL GABLES, FL 33134 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 G VELI FAMILY LLLP  
Address 2847 NE 26 PLACE  
City-State-Zip: FORT LAUDERDALE FL 33306

*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:** FARIDEH V GOZLEVELI

**PRESIDENT**

**02/23/2023**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date