2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 28, 2016
Secretary of State
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Entity Name: STATUS MED ASSISTANCE LLC

Current Principal Place of Business:

17070 COLLINS AVENUE
STE 257
SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

17070 COLLINS AVENUE
STE 257
SUNNY ISLES BEACH, FL 33160 US

FEI Number: 90-0987415

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NEVIDOMY, VLADIMIR
17070 COLLINS AVENUE
257
SUNNY ISLES BEACH, FL 33160 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: VLADIMIR NEVIDOMY 03/28/2016

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGRM	Title	MEMBER
Name	NEVIDOMY, VLADIMIR	Name	BUBUCEA, MARIANA DR.
Address	2030 S OCEAN DRIVE APT# 1504	Address	1745 E HALLANDALE BEACH BLVD APT# 1806W
City-State-Zip:	HALLANDALE BEACH FL 33009	City-State-Zip:	HALLANDALE FL 33009

Title	MGMR
Name	MUZYKA, VERA
Address	18671 COLLINS AVENUE 1502
City-State-Zip:	SUNNY ISLES BEACH FL 33160-3635

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: VLADIMIR NEVIDOMY MGMR 03/28/2016

Electronic Signature of Signing Authorized Person(s) Detail — Date