## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000096324

Entity Name: CMA PROFESSIONAL CENTER, LLC

**Current Principal Place of Business:** 

4495 SW 67TH TERRACE SUITE 207 DAVIE, FL 33314

## **Current Mailing Address:**

4495 SW 67TH TERRACE SUITE 207 DAVIE, FL 33314 US

FEI Number: 47-1117314 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

RIVEIRO, FERNANDO 4495 SW 67TH TERRACE SUITE 207 DAVIE, FL 33314 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: FERNANDO RIVEIRO 02/09/2019

> Electronic Signature of Registered Agent Date

## Authorized Person(s) Detail:

Title MGR

RIVEIRO, FERNANDO Name 4495 SW 67TH TERRACE Address

SUITE 207

City-State-Zip: DAVIE FL 33314

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: FERNANDO RIVEIRO **MANAGER** 

Electronic Signature of Signing Authorized Person(s) Detail

02/09/2019 Date

**FILED** Feb 09, 2019

**Secretary of State** 

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