#### 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000049479

Entity Name: MIAMI GARDENS MEDICAL CONSULTANTS, LLC.

FILED
Jan 28, 2017
Secretary of State
CC1811309918

# **Current Principal Place of Business:**

301 SW 86 AVE SUITE #107

PEMBROKE PINES, FL 33025

### **Current Mailing Address:**

301 SW 86 AVE SUITE #107 PEMBROKE PINES, FL 33025

FEI Number: 47-3601708 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MP COMPLETE SOLUTIONS, LLC. 301 SW 86 AVE SUITE #107 PEMBROKE PINES, FL 33025 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 AMBR

Name DANIELS, WILLIE L

Address 301 SW 86 AVE. SUITE#107
City-State-Zip: PEMBROKE PINES FL 33025

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

**AMBR** 

01/28/2017