2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000128898

Entity Name: DELRAY SPINAL CARE CENTER LLC

Current Principal Place of Business:

3185 S FEDERAL HWY DELRAY BEACH, FL 33483

Current Mailing Address:

3185 S FEDERAL HWY DELRAY BEACH. FL 33483 US

FEI Number: 47-5473622 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZEPHIRIN, JUDITH DC 9370 SW 8TH ST APT 105 BOCA RATON, FL 33428 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

FILED Jul 08, 2016

Secretary of State

CC4315950871

Authorized Person(s) Detail:

Title MGR Title DR

 Name
 ZEPHIRIN, PEDRO
 Name
 ZEPHIRIN, JUDITH

 Address
 9370 SW 8TH ST, 105
 Address
 9370 SW 8TH ST, 105

 City-State-Zip:
 BOCA RATON FL 33428
 City-State-Zip:
 BOCA RATON FL 33428

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

SIGNATURE: JUDITH ZEPHIRIN

OWNER

07/08/2016