## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000007842

Entity Name: AGIMA MED LLC

**Current Principal Place of Business:** 

1756 NW 126 DRIVE

CORAL SPRINGS. FL 33071

**Current Mailing Address:** 

1756 NW 126 DRIVE

CORAL SPRINGS. FL 33071 US

FEI Number: 81-1109491 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STUART A TELLER, PA 7320 GRIFFIN RD 216 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:

Electronic Signature of Registered Agent

Date

**FILED** Apr 09, 2019

**Secretary of State** 

4337330671CC

Authorized Person(s) Detail:

Title MGR Title MGR

HUNDLEY, FRANCES Name Name GARCIA, LOIDA Address 1756 NW 126 DRIVE Address 8305 SW 105 ST City-State-Zip: MIAMI FL 33156 City-State-Zip: CORAL SPRINGS FL 33071

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.

04/09/2019 SIGNATURE: LOIDA GARCIA **MANAGER**