

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000103900

**Entity Name:** MIAMI MEDICAL TRAINING GROUP LLC

**Current Principal Place of Business:**

1661 SW 151 RD  
MIAMI, FL 33185

**Current Mailing Address:**

1661 SW 151 RD  
MIAMI, FL 33185 US

**FEI Number: 81-3080142**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ROBERT, ALBERT L  
1661 SW 151 RD  
MIAMI, FL 33185 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	MGR	Title	MGR
Name	ROBERT, ALBERT L	Name	SOLA, DAVID
Address	1661 SW 151 RD	Address	13445 SW 112TH AVE
City-State-Zip:	MIAMI FL 33185	City-State-Zip:	MIAMI FL 33176

*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: ALBERT L ROBERT**

**MANAGER**

**06/30/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date