

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000127141

Entity Name: COHEN MEDICAL RESEARCH ASSOCIATES LLC

Current Principal Place of Business:

15300 JOG ROAD
SUITE 205
DELRAY BEACH, FL 33446

Current Mailing Address:

15300 JOG ROAD
SUITE 205
DELRAY BEACH, FL 33446

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COHEN MEDICAL ASSOCIATES LLC
15300 JOG ROAD
SUITE 205
DELRAY BEACH, FL 33446 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 COHEN MEDICAL ASSOCIATES LLC
Address 15300 JOG ROAD, SUITE 205
City-State-Zip: DELRAY BEACH FL 33446

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: ROBERT COHEN

MGR

07/05/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date