

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000213086

Entity Name: ELITE MD GROUP, LLC

Current Principal Place of Business:

4205 W ATLANTIC AVE, UNIT C
DELRAY BEACH, FL 33445

Current Mailing Address:

4205 W ATLANTIC AVE, UNIT C
DELRAY BEACH, FL 33445 US

FEI Number: 81-4501095

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JABER, TALIB
4205 W ATLANTIC AVE, UNIT C
DELRAY BEACH, FL 33445 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 MANAGER
Name JABER, TALIB
Address 4205 W ATLANTIC AVE, UNIT C
City-State-Zip: DELRAY BEACH FL 33445

Title MANAGER
Name MARTINEZ, HERIBERTO E
Address 4205 W ATLANTIC AVE, UNIT C
City-State-Zip: DELRAY BEACH FL 33445

Title MANAGER
Name SYED, MUHAMMAD K
Address 4205 W ATLANTIC AVE, UNIT C
City-State-Zip: DELRAY BEACH FL 33445

Title MANAGER
Name TARUGU, VIKRAM
Address 4205 W ATLANTIC AVE, UNIT C
City-State-Zip: DELRAY BEACH FL 33445

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: TALIB JABER

MANAGER

02/02/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date