## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000215888

Entity Name: IBRAHIM HEART CLINIC, PLLC

**Current Principal Place of Business:** 

13842 HARBOR CREEK PL JACKSONVILLE. FL 32224

**Current Mailing Address:** 

13842 HARBOR CREEK PL JACKSONVILLE, FL 32224 US

FEI Number: 81-4572460 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC. 13302 WINDING OAKS COURT SUITE A TAMPA, FL 33612 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 May 01, 2017

**Secretary of State** 

CC6330910698

## Authorized Person(s) Detail:

Title MANAGER

Name IBRAHIM, MORHAF

Address 13842 HARBOR CREEK PL City-State-Zip: JACKSONVILLE FL 32224

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: MORHAF IBRAHIM MANAGER 05/01/2017