

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000001438

Entity Name: HEALTH CENTER MANAGEMENT LLC

Current Principal Place of Business:

2 OAKWOOD BLVD.
SUITE 100
HOLLYWOOD, FL 33020

Current Mailing Address:

2 OAKWOOD BLVD.
SUITE 100
HOLLYWOOD, FL 33020 US

FEI Number: 46-2752240

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPIEWAK, MATHEW
2 OAKWOOD BLVD.
SUITE 100
HOLLYWOOD, FL 33020 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
Name DORFMAN, STEVEN
Address 2 OAKWOOD BLVD. #100
City-State-Zip: HOLLYWOOD FL 33020

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: STEVEN DORFMAN

CEO

08/08/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date