

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000019294

**Entity Name:** THE NEUROLOGY RESEARCH GROUP,LLC**Current Principal Place of Business:**9090 SW 87 COURT  
SUITE 200  
MIAMI, FL 33176**Current Mailing Address:**C/O PERFORMANCE MEDICAL MANAGEMENT, LLC  
9960 NW 116 WAY, SUITE 7  
MEDLEY, FL 33178 US**FEI Number:** 82-0812245**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PAULEY, LANNY  
9960 NW 116 WAY  
200 STE 7  
MEDLEY, FL 33178 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 HERSKOWITZ, ALLAN  
Address 9090 SW 87 COURT #200  
City-State-Zip: MIAMI FL 33176

Title MGR  
Name GRAN, BERNARD  
Address 9090 SW 87 COURT #200  
City-State-Zip: MIAMI FL 33176

Title MGR  
Name DAMSKI, PAUL  
Address 9090 SW 87 COURT #200  
City-State-Zip: MIAMI FL 33176

Title MGR  
Name SERGIO, JARAMILLO  
Address 9090 SW 87 COURT #200  
City-State-Zip: MIAMI FL 33176

Title MGR  
Name PINZON, ALBERTO  
Address 9090 SW 87 COURT #200  
City-State-Zip: MIAMI FL 33176

Title MGR  
Name PERFORMANCE MEDICAL  
MANAGEMENT, LLC  
Address C/O PERFORMANCE MEDICAL  
MANAGEMENT, LLC  
9960 NW 116 WAY, SUITE 7  
City-State-Zip: MEDLEY FL 33178

Title MGR  
Name PAULEY, LANNY  
Address C/O PERFORMANCE MEDICAL  
MANAGEMENT, LLC  
9960 NW 116 WAY, SUITE 7  
City-State-Zip: MEDLEY FL 33178

*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:** LANNY PAULEY

MGR

04/26/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date