

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000032527

**Entity Name:** PHARMACOLOGY RESEARCH, LLC

**Current Principal Place of Business:**

2418 SW 137 AVE  
MIAMI, FL 33175

**Current Mailing Address:**

2418 SW 137 AVE  
MIAMI, FL 33175

**FEI Number: 81-5364938**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

RODRIGUEZ, YOSMAIKEL  
100 NW 170 ST  
SUITE 411  
NORTH MIAMI BEACH, FL 33169 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            RODRIGUEZ, YOSMAIKEL  
Address        100 NW 170 ST  
                  SUITE 411  
City-State-Zip: NORTH MIAMI BEACH FL 33169

*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: YOSMAIKEL RODRIGUEZ**

**AMBR**

**04/17/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date