

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000199566

**Entity Name:** INNOVATIVE HEALTH SERVICES, LLC

**Current Principal Place of Business:**

9677 SEMINOLE BLVD.  
SEMINOLE, FL 33772

**Current Mailing Address:**

9677 SEMINOLE BLVD.  
SEMINOLE, FL 33772

**FEI Number:** 83-1634233

**Certificate of Status Desired:** No

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

UDDIN, MAIRAJ  
9677 SEMINOLE BLVD.  
SEMINOLE, FL 33772 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 UDDIN, MAIRAJ  
Address PO BOX 1329  
City-State-Zip: LARGO FL 33779

*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:** MAIRAJ UDDIN

MD

03/28/2019

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

\_\_\_\_\_  
Date