

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000204122

**Entity Name:** TECHNOMEDICAL LLC

**Current Principal Place of Business:**

4000 PONCE DE LEON BLVD  
470  
CORAL GABLES, FL 33146

**Current Mailing Address:**

9739 NW 10TH TERR  
MIAMI, FL 33172 US

**FEI Number:** 83-2642835

**Certificate of Status Desired:** No

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

COSTA, HENRY  
210 SW 107TH AVE  
MIAMI, FL 33174 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                         | Title           | MGR                  |
| Name            | CORONADO DA VILA, OSWALDO J | Name            | PAZ SERRANO, YANNI C |
| Address         | 9739 NW 10TH TERR           | Address         | 9739 NW 10TH TERR    |
| City-State-Zip: | MIAMI FL 33172              | City-State-Zip: | MIAMI FL 33172       |

*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:** CORONADO DA VILA , OSWALDO J

**MEMBER**

**05/01/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date