## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000246999

Entity Name: COBRA BIOMEDICAL LLC

**Current Principal Place of Business:** 

125 S. STATE ROAD 7 SUITE #175 WELLINGTON. FL 33414

**Current Mailing Address:** 

125 S. STATE ROAD 7 SUITE #175 WELLINGTON, FL 33414 US

FEI Number: 83-2534684 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PEDERSEN, LAURA 125 S. STATE ROAD 7 STE 104-175 WELLINGTON, FL 33414 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: LAURA PEDERSEN 04/30/2025

Electronic Signature of Registered Agent

Date

FILED Apr 30, 2025

**Secretary of State** 

3799169461CC

Authorized Person(s) Detail:

Title AMBR

Name RUIZ, MARTIN I

Address 125 S. STATE ROAD 7 STE 104-175

City-State-Zip: WELLINGTON FL 33414

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.

Electronic Signature of Signing Authorized Person(s) Detail