

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000271950

Entity Name: CENTRO DE MEDICINA DEPORTIVA MALAGUTI, CMDM, LLC

Current Principal Place of Business:

12168 SW 5TH CT
PEMBROKE PINES, FL 33025

Current Mailing Address:

12168 SW 5TH CT
PEMBROKE PINES, FL 33025 US

FEI Number: 83-2969893

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MALAGUTI, ALFONSO J
12168 SW 5TH CT
PEMBROKE PINES, FL 33025 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 MALAGUTI, ALFONSO J
Address 12168 SW 5TH CT
City-State-Zip: PEMBROKE PINES FL 33025

Title AMBR
Name MALAGUTI, EMILIO
Address 12168 SW 5TH CT
City-State-Zip: PEMBROKE PINES FL 33025

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: EMILIO MALAGUTI

AUTHORIZED MANAGER

02/02/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date