## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000050004

Entity Name: PRUFEN CLINICAL RESEARCH LLC

## **Current Principal Place of Business:**

1825 PONCE DE LEON BOULEVARD SUITE 101 CORAL GABLES, FL 33134

# **Current Mailing Address:**

1825 PONCE DE LEON BOULEVARD SUITE 101 CORAL GABLES, FL 33134 US

# FEI Number: 83-3638242

### Name and Address of Current Registered Agent:

HERNANDEZ, GUILLERMO 1825 PONCE DE LEON BOULEVARD SUITE 101 CORAL GABLES, FL 33134 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

### Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	HERNANDEZ, GUILLERMO	Name	FIGUEROA, CARLOS
Address	1825 PONCE DE LEON BOULEVARD Address   SUITE 101 City-State	Address	1331 BRICKELL BAY DR APT 508
		City-State-Zip: MIAMI FL 33131	MIAMI EL 33131
City-State-Zip:	CORAL GABLES FL 33134		

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: GUILLERMO HERNANDEZ

MANAGER

03/20/2022 Date

Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 20, 2022 Secretary of State 4091913298CC

Certificate of Status Desired: Yes