

2021 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

Certificate of Status Desired: No

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

Date

Authorized Person(s) Detail :

Title MGR
Name HERNANDEZ, GUILLERMO
Address 1825 PONCE DE LEON BOULEVARD
SUITE 101
City-State-Zip: CORAL GABLES FL 33134

Title MGR
Name FIGUEROA, CARLOS
Address 1331 BRICKELL BAY DR APT 508
City-State-Zip: MIAMI FL 33131

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

04/30/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date