

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000068550

Entity Name: GLOBAL MEDICAL ASSETS LLC**Current Principal Place of Business:**17180 ROYAL PALM BLVD
STE 3
WESTON, FL 33326**Current Mailing Address:**17180 ROYAL PALM BLVD
STE 3
WESTON, FL 33326 US**FEI Number:** 83-4039132**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NINO, FRANCY J
17180 ROYAL PALM BLVD
STE 3
WESTON, FL 33326 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	NINO, FRANCY J
Address	17180 ROYAL PALM BLVD STE 3
City-State-Zip:	WESTON FL 33326
Title	AMBR
Name	SOUTH FLORIDA URGENT CARE CENTERS LLC
Address	302 NW 179TH AVE STE 103
City-State-Zip:	PEMBROKE PINES FL 33029

Title	AMBR
Name	ASSETS LEADER LLC
Address	17180 ROYAL PALM BLVD STE 3
City-State-Zip:	WESTON FL 33326
Title	AMBR
Name	EX4HEALTH COMPANY
Address	230 LAKEVIEW DR BLDG 10 APT 101
City-State-Zip:	WESTON FL 33326

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: FRANCY J NINO**MGR****06/25/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date