

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000196281

Entity Name: ALLIANCE CLINICAL RESEARCH OF TAMPA, LLC

Current Principal Place of Business:

8313 W HILLSBOROUGH AVE
STE 210
TAMPA, FL 33615

Current Mailing Address:

8313 W HILLSBOROUGH AVE
STE 210
TAMPA, FL 33615 US

FEI Number: 84-2702747

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RUDA, LUIS
8313 W HILLSBOROUGH AVE
STE 210
TAMPA, FL 33615 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: LUIS RUDA

02/07/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name RUDA, LUIS
Address 8313 W HILLSBOROUGH AVE
 STE 210
City-State-Zip: TAMPA FL 33615

Title MANAGER
Name QUINONES, GRETEL
Address 8313 W HILLSBOROUGH AVE
 STE 210
City-State-Zip: TAMPA FL 33615

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: RUDA, LUIS

MANAGER

02/07/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date