

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000248326

**Entity Name:** INNOVATION MEDICAL GROUP LLC

**Current Principal Place of Business:**

6741 SW 157TH CT  
MIAMI, FL 33193

**Current Mailing Address:**

6741 SW 157TH CT  
MIAMI, FL 33193 US

**FEI Number: 85-2893473**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

RELIABLE CONSULTING SERVICES LLC  
12905 SW 42ND ST  
202  
MIAMI, FL 33175 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 INNOVATION MEDICAL RESEARCH  
CENTER INC  
Address 6741 SW 157TH CT  
City-State-Zip: MIAMI FL 33193

*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: INNOVATION MEDICAL RESEARCH CENTER INC MGR**

**04/24/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date