

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000314815

**Entity Name:** CAPRICORN MEDICAL, LLC

**Current Principal Place of Business:**

1205 SW 37TH AVENUE  
MIAMI, FL 33135

**Current Mailing Address:**

1205 SW 37TH AVENUE  
MIAMI, FL 33135

**FEI Number:** 85-3478079

**Certificate of Status Desired:** No

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

MORA, CRISTINA  
1205 SW 37TH AVENUE  
MIAMI, FL 33135 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	Title	MGR
Name	FLORIDA HEALTH INVESTMENTS, LLC	Name	CUAN, AILISA MD
Address	1205 SW 37TH AVENUE	Address	1205 SW 37TH AVENUE
City-State-Zip:	MIAMI FL 33135	City-State-Zip:	MIAMI FL 33135

*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:** CRISTINA MORA

RA

01/27/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date