

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000222782

Entity Name: MEDICARE ADVANTAGE CENTER LLC

Current Principal Place of Business:

2151 W HILLSBORO BLVD
SUITE 402 SUITE 402
DEERFIELD BEACH, FL 33442

Current Mailing Address:

2151 W HILLSBORO BLVD
SUITE 402 SUITE 402
DEERFIELD BEACH, FL 33442 US

FEI Number: 87-0899265

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JAFFY, MAX A
2151 W HILLSBORO BLVD
SUITE 402 SUITE 402
DEERFIELD BEACH, FL 33442 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 JAFFY, TODD A
Address 1487 SOUTH FEDERAL HIGHWAY
City-State-Zip: BOYTON BEACH FL 33435

Title MANAGER
Name JAFFY, MAX A
Address 32 SE 2ND AVE
City-State-Zip: DELRAY BEACH FL 33444

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: MAX JAFFY

PARTNER

04/22/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date