## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000500803

Entity Name: ALFA MEDICAL RESEARCH LLC

**Current Principal Place of Business:** 

7777 DAVIE RD EXT 202A

HOLLYWOOD, FL 33024

## **Current Mailing Address:**

7777 DAVIE RD EXT 202A

HOLLYWOOD, FL 33024 US

FEI Number: 87-3706739 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

RODRIGUEZ, YOSBEL 2160 NW 190 AVENUE PEMBROKE PINES, FL 33029 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

FILED Feb 22, 2023

**Secretary of State** 

3803081703CC

## Authorized Person(s) Detail:

Title PRESIDENT Title MANAGER

NameRODRIGUEZ, YOSBELNameRAMIREZ, CLAUDIAAddress2160 NW 190TH AVEAddress2160 NW 190TH AVE

City-State-Zip: PEMBROKE PINES FL 33029 City-State-Zip: PEMBROKE PINES FL 33029

Title VP Title MANAGER

NameCAVA, CARLOSNameRAMIREZ, PAMELAAddress4741 SW 57TH TERRACEAddress4741 SW 57TH TERRACE

City-State-Zip: DAVIE FL 33314 City-State-Zip: DAVIE FL 33314

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.

Electronic Signature of Signing Authorized Person(s) Detail