## **2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000406089

Entity Name: HEALTHCARE MIAMI LLC

**Current Principal Place of Business:** 

900 W 49TH ST. SUITE 514 G HIALEAH, FL 33012 FILED
Apr 30, 2023
Secretary of State
3992641903CC

## **Current Mailing Address:**

900 W 49TH ST. SUITE 514G HIALEAH, FL 33012 US

FEI Number: 92-0392394 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SANCHEZ, ANTONIO 900 W 49TH ST. SUITE 514G HIALEAH, FL 33012 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 SANCHEZ, ANTONIO

Address 900 W 49TH ST

SUITE 514G

City-State-Zip: HIALEAH FL 33012

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: ANTONIO SANCHEZ MANAGER 04/30/2023