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.

MGR

## SIGNATURE: MENDOZA MOLERIO, JULIO D

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: ABBA MEDICAL GROUP LLC

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

11420 N KENDALL DR 110 MIAMI, FL 33176

# **Current Mailing Address:**

DOCUMENT# L23000416339

11420 N KENDALL DR 110 MIAMI, FL 33176 US

## FEI Number: 93-3363304

## Name and Address of Current Registered Agent:

MENDOZA MOLERIO, JULIO D 11420 N KENDALL DR 110 MIAMI, FL 33176 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 Authorized Person(s) Detail : Title MGR Title MGR Name MENDOZA MOLERIO, JULIO D Name FERNANDEZ RAMIREZ, JORGE 11420 N KENDALL DR STE 110 Address 11420 N KENDALL DR STE 110 Address City-State-Zip: MIAMI FL 33176 City-State-Zip: MIAMI FL 33176 Title MANAGER LOPEZ, MARIA E Name Address 11420 N KENDALL DR 110 City-State-Zip: MIAMI FL 33176

Certificate of Status Desired: No

FILED Mar 19, 2025 Secretary of State 7630152429CC

Date

Date

03/19/2025