

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000002381

Entity Name: APPLIED PRESCRIPTION TECHNOLOGIES, LLC

Current Principal Place of Business:

4581 WEST ROAD #362
WESTON, FL 33331

Current Mailing Address:

4581 WEST ROAD #362
WESTON, FL 33331

FEI Number: 46-5257184

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 AUTHORIZED MEMBER
Name CALLAGY, ROBERT A
Address 1010 SEMINOLE DRIVE
APT# 1609
City-State-Zip: FORT LAUDERDALE FL 33304

Title AUTHORIZED MEMBER
Name CAPRIO, JAMES J
Address 4581 WEST ROAD #362
City-State-Zip: WESTON FL 33331

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: JAMES J. CAPRIO

MEMBER

04/29/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date