

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000007226

Entity Name: FEDERACION MEDICA VENEZOLANA, INC.**Current Principal Place of Business:**6993 NW 82 AVE
BAY 18
MIAMI, FL 33166**Current Mailing Address:**6993 NW 82 AVE
BAY 18
MIAMI, FL 33166 US**FEI Number: NOT APPLICABLE****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DE LA CRUZ, PASTOR SR.
6993 NW 82 AVE
BAY 18
MIAMI, FL 33166 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:** PASTOR DE LA CRUZ

04/13/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P,D
Name	LEON NATERA, DOUGLAS
Address	9690 WEST SAMPLE ROAD, SUITE 104
City-State-Zip:	CORAL SPRINGS FL 33065-4046

Title	D,VP
Name	PARRA, DIANELA
Address	9690 WEST SAMPLE ROAD, SUITE 104
City-State-Zip:	CORAL SPRINGS FL 33065-4046

Title	D
Name	TREJO PARRA, JORGE
Address	9690 WEST SAMPLE ROAD, SUITE 104
City-State-Zip:	CORAL SPRINGS FL 33065-4046

Title	D
Name	CONTRERAS TOLEDO, ABDON
Address	9690 WEST SAMPLE ROAD, SUITE 104
City-State-Zip:	CORAL SPRINGS FL 33065-4046

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DOUGLAS LEON NATERA

PRESIDENT

04/13/2018

Electronic Signature of Signing Officer/Director Detail

Date