

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 688380

Entity Name: GUSTAVO BUSTAMANTE P.A.

Current Principal Place of Business:

500 S. DELANEY #402
ORLANDO, FL 32801

Current Mailing Address:

500 S. DELANEY #402
ORLANDO, FL 32801

FEI Number: 59-2119795

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSTAMANTE MARIA ELISA
500 S. DELANEY #402
ORLANDO, FL 32801 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

Officer/Director Detail :

Title MD
Name BUSTAMANTE, GUSTAVO MD.,PA
Address 500 S. DELANEY #402
City-State-Zip: ORLANDO FL 32801

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GUSTAVO BUSTAMANTE MD

MD

03/03/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date