

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H33781

Entity Name: ALFONSO H. SAA, M.D., P.A.

Current Principal Place of Business:

508 SOUTH HABANA AVENUE
SUITE 255
TAMPA, FL 33609

Current Mailing Address:

508 SOUTH HABANA AVENUE
SUITE 255
TAMPA, FL 33609

FEI Number: 59-2476212

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAA, ALFONSO H., M.D.,P.A.
508 SOUTH HABANA AVENUE
SUITE 255
TAMPA, FL 33609 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 DIRECTOR
Name SAA, ALFONSO H DR.
Address 508 SOUTH HABANA AVENUE
 SUITE 255
City-State-Zip: TAMPA FL 33609

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: ALFONSO H. SAA

DIRECTOR

02/28/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date