

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K55362

**Entity Name:** ROBERTO MOYA M.D., P.A.

**Current Principal Place of Business:**

16850 COLLINS AVENUE  
#112/676  
SUNNYISLES BEACH, FL 33160

**Current Mailing Address:**

16850 COLLINS AVENUE  
#112/676  
SUNNYISLES BEACH, FL 33160 US

**FEI Number:** 65-0082473

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MOYA, ROBERTO  
16850 COLLINS AVENUE  
#112/676  
SUNNYISLES BEACH, FL 33160 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            D  
Name            MOYA, ROBERTO DR.  
Address        16850 COLLINS AVENUE  
                  #112/676  
City-State-Zip: SUNNYISLES BEACH FL 33160

*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:** ROBERTO A. MOYA MD

**DIRECTOR**

**04/10/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date