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: ALVARO G MANOTAS MD Electronic Signature of Signing Officer/Director Detail

MANOTAS, CAMILA

817 S. UNIVERSITY DR., SUITE 120 PLANTATION, FL 33324 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:

Officer/Director Detail : Title PD Title ST MANOTAS, ALVARO G MANOTAS, CAMILA Name Name 1330 NW 79TH AVE 1330 NW 79TH AVE Address Address

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT DOCUMENT# L39734

Entity Name: ALVARO G. MANOTAS, M.D., PA

Current Principal Place of Business:

817 S. UNIVERSITY DR. #120 PLANTATION, FL 33324

Current Mailing Address:

817 S. UNIVERSITY DR. #120 PLANTATION, FL 33324 US

FEI Number: 65-0166645

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

/ (ddi 000		/1001000	1000 NW / 0111/WE
City-State-Zip:	PLANTATION FL 33324	City-State-Zip:	PLANTATION FL

01/17/2017 Date

Date

FILED Jan 17, 2017 Secretary of State CC8005152256

Certificate of Status Desired: No

PRESIDENT