

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M98336

**Entity Name:** CHARLES HERRERA, M.D., P.A.

**Current Principal Place of Business:**

12333 NW 10TH DR  
CORAL, FL 33071

**Current Mailing Address:**

12333 NW 10TH DR  
STE 105 3071  
CORAL SPRINGS, FL 33071-6172 US

**FEI Number:** 65-0104538

**Certificate of Status Desired:** No

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

HERRERA, CHARLES, M.D.  
12333 NW 10TH DR  
CORAL SPRINGS, FL 33071-6172 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 DR.  
Name HERRERA, CHARLES  
Address 12333 NW 10TH DR  
33071  
City-State-Zip: CORAL FL 33321

*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:** CHARLES HERRERA MD

**PRESIDENT**

**03/29/2022**

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

\_\_\_\_\_  
Date