# 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT DOCUMENT# P00000011340

Entity Name: CARRIE LANDESS, M.D., P.A.

# **Current Principal Place of Business:**

16855 NE 2ND AVENUE **STE 102** NORTH MIAMI, FL 33162

# **Current Mailing Address:**

**16855 NE 2ND AVENUE STE 102** NORTH MIAMI, FL 33162 US

## FEI Number: 65-0736955

## Name and Address of Current Registered Agent:

LANDESS, CARRIE 6122 N.W. 175TH TERRACE MIAMI LAKES, FL 33015 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:

Title

Electronic Signature of Registered Agent Date **Officer/Director Detail :** Ρ Title D LANDESS, CARRIE SERRANO, YVETTE Name Name 1624 NW 144TH WAY Address 6122 N.W. 175TH TERRACE Address

City-State-Zip:

City-State-Zip: MIAMI LAKES FL 33015

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.

D

#### SIGNATURE: YVETTE SERRANO

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

PEMBROKE PINES FL 33028

04/22/2014