

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000018521

Entity Name: LISSETTE B. ORTIZ, P.A.**Current Principal Place of Business:**1430 SOUTH DIXIE HIGHWAY
STE 321
CORAL GABLES, FL 33146**Current Mailing Address:**1430 SOUTH DIXIE HIGHWAY
STE 321
CORAL GABLES, FL 33146**FEI Number:** 65-0984748**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ORTIZ, LISSETTE B
1430 SOUTH DIXIE HIGHWAY
STE 321
CORAL GABLES, FL 33146 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	ORTIZ, LISSETTE B
Address	1430 SOUTH DIXIE HIGHWAY, STE 321
City-State-Zip:	CORAL GABLES FL 33146

Title	DVP
Name	ORTIZ, MICHAEL
Address	1430 SOUTH DIXIE HIGHWAY, STE 321
City-State-Zip:	CORAL GABLES FL 33146

Title	PS
Name	ORTIZ, LISSETTE B
Address	1430 SOUTH DIXIE HIGHWAY, STE 321
City-State-Zip:	CORAL GABLES FL 33146

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: LISSETTE B ORTIZ**PRESIDENT****03/28/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date