

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000024809

**Entity Name:** PINNACLE HEALTH GROUP, P.A.

**Current Principal Place of Business:**

2605 W. SWANN AVE.  
SUITE 100  
TAMPA, FL 33609

**Current Mailing Address:**

PO BOX 18344  
TAMPA, FL 33679

**FEI Number: 59-3651979**

**Certificate of Status Desired: No**

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

DIASTI, SAM  
901 S. GOLFOVIEW ST  
TAMPA, FL 33629 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	PD	Title	SD
Name	DIASTI, SAM M.D.	Name	DIASTI, RIHAM
Address	2605 W. SWANN AVE. SUITE 100	Address	901 S. GOLFOVIEW
City-State-Zip:	TAMPA FL 33609	City-State-Zip:	TAMPA FL 33629

*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: RIHAM DIASTI** \_\_\_\_\_

VP

03/31/2019

Electronic Signature of Signing Officer/Director Detail

Date