## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000016298

Entity Name: JACOBO A. CRUZ, M.D., P.A.

**Current Principal Place of Business:** 

4400 BAYOU BLVD SUITE 51 PENSACOLA, FL 32503

## **Current Mailing Address:**

4400 BAYOU BLVD SUITE 51 PENSACOLA, FL 32503

FEI Number: 02-0534427 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CRUZ, JACOBO AMD 4400 BAYOU BLVD SUITE 51 PENSACOLA, FL 32503 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

FILED Mar 18, 2015

**Secretary of State** 

CC5735111039

## Officer/Director Detail:

Title DCS

Name CRUZ, JACOBO A

Address 4400 BAYOU BLVD STE 51 City-State-Zip: PENSACOLA FL 32503

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: JACOBO A. CRUZ, M.D.

**PRESIDENT** 

03/18/2015