**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

**FILED**
**Apr 29, 2016**
**Secretary of State**
**CC9129574148**

DOCUMENT# P01000072678

**Entity Name:** ROBERT DE LA TORRE MD, P.A.

**Current Principal Place of Business:**

149 WEERTS ROAD
SAN MATEO, FL 32187

**Current Mailing Address:**

P.O. BOX 400
PALATKA, FL 32178 US

**FEI Number: 65-1128666**

**Certificate of Status Desired:** No

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

SEIJAS, ANA
149 WEERTS ROAD
SAN MATEO, FL 32187 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 | PSTD |
| Name | DE LA TORRE, ROBERT RROBERT |
| Address | 149 WEERTS ROAD |
| City-State-Zip: | SAN MATEO FL 32187 |

*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: ROBERT DE LA TORRE PRESIDENT 04/29/2016

Electronic Signature of Signing Officer/Director Detail — Date