## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000086918

Entity Name: MONA ARABI, MD, PA

**Current Principal Place of Business:** 

C/O ANN COBB 2469 COUNTY ROAD ,401A PANASOFFSKEE, FL 33538

## **Current Mailing Address:**

C/O ANN COBB 2469 COUNTY ROAD ,401A PANASOFFSKEE, FL 33538 US

FEI Number: 55-0801651 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ARABI, MONA NAJIB C/O ANN COBB 2469 COUNTY ROAD ,401A PANASOFFKEE, FL 33538 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 Feb 16, 2019

**Secretary of State** 

1096103729CC

## Officer/Director Detail:

Title F

Name ARABI, MONA NMD

Address 2469 COUNTY ROAD ,401A City-State-Zip: PANASOFFKEE FL 33538

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.

Electronic Signature of Signing Officer/Director Detail