

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000044357

Entity Name: PATRICIA M. FINE, M.D., P.A.

Current Principal Place of Business:

521 NE 55TH ST
MIAMI, FL 33137

Current Mailing Address:

521 NE 55TH ST
MIAMI, FL 33137

FEI Number: 20-0012625

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORALES, PATRICIA M
521 NE 55TH ST
MIAMI, FL 33137 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 PRES
Name MORALES, PATRICIA M
Address 521 NE 55TH ST
City-State-Zip: MIAMI FL 33137

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: PATRICIA MORALES

PRES

03/19/2014

Electronic Signature of Signing Officer/Director Detail

Date