

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000038963

Entity Name: KWABENA AYESU, M.D., P.A.

Current Principal Place of Business:

70 SPRING VISTA DR STE 1
DEBARY, FL 32713

Current Mailing Address:

70 SPRING VISTA DR STE 1
DEBARY, FL 32713

FEI Number: 56-2500290

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AYESU, KWABENA MD
70 SPRING VISTA DR STE 1
DEBARY, FL 32713 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 P
Name AYESU, KWABENA MD
Address 332 N SPAULDING COVE
City-State-Zip: LAKE MARY FL 32746

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: KWABENA AYESU, MD

PRESIDENT

09/04/2014

Electronic Signature of Signing Officer/Director Detail

Date