

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000100232

**Entity Name:** ODY GONZALEZ-FABIAN D.M.D., P.A.

**Current Principal Place of Business:**

8200 SW 117 AVE SUITE 216  
MIAMI, FL 33155

**Current Mailing Address:**

7250 SW 39 ST  
MIAMI, FL 33155 US

**FEI Number:** 20-5341101

**Certificate of Status Desired:** No

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

OTERO, GUELIA  
7250 SW 39TH ST.  
MIAMI, FL 33155 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 D  
Name GONZALEZ-FABIAN, ODY DR.  
Address 7250 SW 39 ST  
City-State-Zip: MIAMI FL 33155

*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:** ODY GONZALEZ-FABIAN

**PRESIDENT**

**02/09/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date