## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000023320

Entity Name: GENVASCULAR SURGICAL PA

**Current Principal Place of Business:** 

305 SHORE DRIVE E. MIAMI, FL 33133

**Current Mailing Address:** 

305 SHORE DRIVE E. MIAMI, FL 33133 US

FEI Number: 20-8492007 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAMIREZ, DANIEL MD 305 SHORE DRIVE E. MIAMI, FL 33133 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: DANIEL RAMIREZ 04/05/2019

Electronic Signature of Registered Agent

Date

FILED Apr 05, 2019

**Secretary of State** 

7664472704CC

## Officer/Director Detail:

Title PRES

Name RAMIREZ, DANIEL
Address 305 SHORE DRIVE E.
City-State-Zip: MIAMI FL 33133

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: DANIEL RAMIREZ PRESIDENT

04/05/2019 Date