

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000030523

**Entity Name:** KIDS DOC PEDIATRICS, PA

**Current Principal Place of Business:**

6400 WEST NEWBERRY ROAD  
SUITE 109  
GAINESVILLE, FL 32605

**Current Mailing Address:**

3747 SW 92ND DRIVE  
GAINESVILLE, FL 32608

**FEI Number:** 20-8494142

**Certificate of Status Desired:** No

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

SCACCABARROZZI, LUIS EDUARDO MD, MPH  
3747 SW 92ND DRIVE  
GAINESVILLE, FL 32608 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 DR  
Name SCACCABARROZZI, LUIS EDUARDO  
MD, MPH  
Address 3747 SW 92ND DRIVE  
City-State-Zip: GAINESVILLE FL 32608

*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:** LUIS EDUARDO SCACCABARROZZI

DR

02/06/2024

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

\_\_\_\_\_  
Date