

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000006968

Entity Name: RASHA LAWRENCE, M.D., P.A.

Current Principal Place of Business:

810 ANDREWS AVE
DELRAY BEACH , FL 33483

Current Mailing Address:

810 ANDREWS AVE
DELRAY BEACH , FL 33483 US

FEI Number: 26-1779861

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RASHA LAWRENCE, M.D, P.A
810 ANDREWS AVE
DELRAY BEACH , FL 33483 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: RASHA LAWRENCE

01/20/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title M.D
Name LAWRENCE, RASHA
Address 810 ANDREWS AVE
City-State-Zip: DELRAY BEACH FL 33483

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: RASHA LAWRENCE

PRESIDENT

01/20/2020

Electronic Signature of Signing Officer/Director Detail

Date