

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000085858

**Entity Name:** LOUIS M STARACE M.D., P.A.

**Current Principal Place of Business:**

6231 PGA BLVD #104  
SUITE #123  
PALM BEACH GARDENS, FL 33418

**Current Mailing Address:**

6231 PGA BLVD #104  
SUITE #123  
PALM BEACH GARDENS, FL 33418

**FEI Number:** 26-3382863

**Certificate of Status Desired:** No

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

STARACE, LOUIS M.  
6231 PGA BLVD #104  
SUITE 123  
PALM BEACH GARDENS, FL 33418 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:** LOUIS M STARACE

04/29/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DR  
Name STARACE, LOUIS M.D.  
Address 6231 PGA BLVD SUITE 123  
City-State-Zip: PALM BEACH GARDENS FL 33418

*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:** LOUIS M. STARACE

MD/PRES.

04/29/2015

Electronic Signature of Signing Officer/Director Detail

Date