

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000106926

**Entity Name:** FELIPE CABALLERO M.D. INC.

**Current Principal Place of Business:**

210 POINCIANA DRIVE  
110  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

210 POINCIANA DRIVE  
110  
SUNNY ISLES BEACH, FL 33160

**FEI Number:** 26-3908140

**Certificate of Status Desired:** No

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

CABALLERO, FELIPE  
210 POINCIAN DRIVE  
SUNNY ISLES BEACH, FL 33160 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 P  
Name CABALLERO, FELIPE  
Address 210 POINCIANA DRIVE  
City-State-Zip: SUNNY ISLES BEACH FL 33160

*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:** FELIPE CABALLERO

P

04/07/2014

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

\_\_\_\_\_  
Date