## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000087043

Entity Name: MDLIVE MEDICAL GROUP, P.A.

**Current Principal Place of Business:** 

13630 NW 8TH STREET SUITE 205 SUNRISE, FL 33325

**Current Mailing Address:** 

13630 NW 8TH STREET SUITE 205

SUNRISE, FL 33325 US

FEI Number: 27-0982413 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC. 115 NORTH CALHOUN ST., STE 4 TALLAHASSEE, FL 32301 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

**FILED** Mar 27, 2019

**Secretary of State** 

5852488009CC

Officer/Director Detail:

CFO Title Title PRESIDENT/SECRETARY MONAHAN, DAN COLE, SHAWN M. DR. Name Name Address 13630 NW 8TH STREET Address 13630 NW 8TH STREET SUITE 205

SUITE 205

SUNRISE FL 33325 SUNRISE FL 33325 City-State-Zip: City-State-Zip:

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: DR. SHAWN M. COLE

PRESIDENT/SECRETARY 03/27/2019

Electronic Signature of Signing Officer/Director Detail

Date