

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000056064

**Entity Name:** MAXIMILIANO VELASCO, M.D., P.A.

**Current Principal Place of Business:**

7000 SW 62ND AVE  
SUITE 535  
MIAMI, FL 33143

**Current Mailing Address:**

7000 SW 62ND AVE  
SUITE 535  
MIAMI, FL 33143

**FEI Number:** 27-2997533

**Certificate of Status Desired:** No

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

THE MEDI-LAW FIRM  
1400 NW 10TH AVE  
PENTHOUSE III  
MIAMI, FL 33136 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            DIR  
Name            VELASCO, MAXIMILIANO  
Address        7000 SW 62ND AVE, SUITE 535  
City-State-Zip: MIAMI FL 33143

*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:** MAXIMILIANO VELASCO

DIR

02/20/2014

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

\_\_\_\_\_  
Date