

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000095904

**Entity Name:** ADARVE ORTHOFOOT AND ANKLE P.A.

**Current Principal Place of Business:**

1735 TARPON BAY DR. S  
NAPLES, FL 34119

**Current Mailing Address:**

1735 TARPON BAY DR. S  
NAPLES, FL 34119 US

**FEI Number: 26-1910883**

**Certificate of Status Desired: No**

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

AXIOM ACCOUNTING, INC  
4951 TAMIAMI TRAIL. NORTH  
SUITE 103  
NAPLES, FL 34103 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: ROSA ESTELA MORALES**

**04/29/2014**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P	Title	VP
Name	ADARVE, DIEGO L	Name	ADARVE, IRIS P
Address	1735 TARPON BAY DR. S	Address	1735 TARPON BAY DR. S
City-State-Zip:	NAPLES FL 34119	City-State-Zip:	NAPLES FL 34119

*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: DIEGO ADARVE**

**P**

**04/29/2014**

Electronic Signature of Signing Officer/Director Detail

Date