## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000046441

Entity Name: OD MEDICAL CORP

## **Current Principal Place of Business:**

8531 NW 66TH ST B MIAMI, FL 33166

## **Current Mailing Address:**

10620 NW 88TH ST 202 DORAL, FL 33178 US

## FEI Number: 81-2765986

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

MARTINEZ, PABLO A 200 S BISCAYNE BLVD SUITE 2790 MIAMI, FL 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

#### **Officer/Director Detail :**

Title D Name ORIANA GABRIELA DAVILA CHACIN Address 8531 NW 66TH ST B City-State-Zip: MIAMI FL 33166

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.

DIRECTOR

SIGNATURE: ORIANA DAVILA

Electronic Signature of Signing Officer/Director Detail

# FILED Apr 24, 2019 Secretary of State 5899402768CC

Certificate of Status Desired: No

04/24/2019

Date

Date