

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000029460

**Entity Name:** CENTRAL FLORIDA PRIMARY HEALTH MANAGEMENT, INC.

**Current Principal Place of Business:**

2603 WINDWARD CT  
ORLANDO, FL 32805

**Current Mailing Address:**

2603 WINDWARD CT  
ORLANDO, FL 32805 US

**FEI Number: 83-4297975**

**Certificate of Status Desired: No**

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

VELASCO MASSON, ANDRES  
2603 WINDWARD CT  
ORLANDO, FL 32805 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	PTD	Title	S
Name	VELASCO MASSON, ANDRES	Name	VELASCO MASSON, OSVALDO
Address	2603 WINDWARD CT	Address	2603 WINDWARD CT
City-State-Zip:	ORLANDO FL 32805	City-State-Zip:	ORLANDO FL 32805

*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: VELASCO MASSON, ANDRES**

**CEO**

**02/01/2022**

Electronic Signature of Signing Officer/Director Detail

Date