

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000091884

Entity Name: ZIPHYCARE MEDICAL OF FLORIDA, P.A.

Current Principal Place of Business:

788 NORTHEAST 23RD STREET
#4102
MIAMI, FL 33137

Current Mailing Address:

788 NORTHEAST 23RD STREET
#4102
MIAMI, FL 33137 US

FEI Number: 87-3278490

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

COHEN, STEPHANIE
788 NORTHEAST 23RD STREET
#4102
MIAMI, FL 33137 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 P
Name UKRAINSKY, GENNADY M.D.
Address 210 WEST 96TH STREET, #4
City-State-Zip: NEW YORK NY 10025

Title VP
Name SUMAREVA, RADA DDS
Address 210 WEST 96TH STREET, #4
City-State-Zip: NEW YORK NY 10025

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: GENNADY UKRAINSKY, M.D.

PRESIDENT

02/21/2022

Electronic Signature of Signing Officer/Director Detail

Date