

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000010569

**Entity Name:** MARTHA RODRIGUEZ, M.D., P.A.

**Current Principal Place of Business:**

9228 EQUUS CIRCLE  
BOYNTON BEACH, FL 33472

**Current Mailing Address:**

9228 EQUUS CIRCLE  
BOYNTON BEACH, FL 33472 US

**FEI Number:** 65-0556223

**Certificate of Status Desired:** No

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

RODRIGUEZ, MARTHA MPRES  
9228 EQUUS CIRCLE  
BOYNTON BEACH, FL 33472 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	PT	Title	SV
Name	MARTHA RODRIGUEZ, MARTHA M.D.	Name	MARTHA RODRIGUEZ, NATALIE M.D.
Address	9228 EQUUS CIRCLE	Address	9228 EQUUS CIRCLE
City-State-Zip:	BOYNTON BEACH FL 33472	City-State-Zip:	BOYNTON BEACH FL 33472

*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:** MARTHA RODRIGUEZ

PT

03/20/2023

Electronic Signature of Signing Officer/Director Detail

Date