

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000005917

**Entity Name:** MARK S. AVILA, M.D., PROFESSIONAL ASSOCIATION

**Current Principal Place of Business:**

2140 W 68TH ST  
SUITE 300  
HIALEAH, FL 33016

**Current Mailing Address:**

2140 W. 68TH STREET  
SUITE 300  
HIALEAH, FL 33016 US

**FEI Number:** 65-0637388

**Certificate of Status Desired:** No

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

GOLDBERG, THEODORE MESQ.  
3250 MARY STREET  
SUITE 400  
COCONUT GROVE, FL 33133 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 D  
Name AVILA, MARK SM.D.  
Address 2140 W. 68TH ST., SUITE 300  
City-State-Zip: HIALEAH FL 33016

*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:** MARK S. AVILA MD

**PRESIDENT**

**01/12/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date