

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000070703

Entity Name: DR. ELEONOR PIMENTEL, M.D., P.A.

Current Principal Place of Business:

747 PONCE DE LEON BLVD.
SUITE 408
CORAL GABLES, FL 33134

Current Mailing Address:

747 PONCE DE LEON BLVD.
SUITE 408
CORAL GABLES, FL 33134

FEI Number: 65-0012158

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAST, LILLIAM R
2525 SW 4TH STREET
MIAMI, FL 33135 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 PIMENTEL, ELEONOR
Address 747 PONCE DE LEON BLVD, SUITE
 408
City-State-Zip: CORAL GABLES FL 33134

Title OFFICER
Name MACEYRAS, REGINO N
Address 747 PONCE DE LEON BLVD.
 SUITE 408
City-State-Zip: CORAL GABLES FL 33134

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: ELEONOR PIMENTEL, M.D.

PRESIDENT

02/10/2013

Electronic Signature of Signing Officer/Director Detail

Date