## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S72819

Entity Name: ANTONIO MORA, M.D., P.A.

#### Current Principal Place of Business:

1435 WEST 49TH PLACE SUITE 305 HIALEAH, FL 33012

## **Current Mailing Address:**

P.O. BOX 561147 MIAMI, FL 33256 11

# FEI Number: 65-0340977

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

MORA, ANTONIO 1435 WEST 49TH PLACE 305 HIALEAH, FL 33012 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

#### Officer/Director Detail :

TitlePDNameMORA, ANTONIOAddress1435 WEST 49TH PLACE STE 305City-State-Zip:HIALEAH FL 33012

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.

PRESIDENT

SIGNATURE: ANTONIO MORA, M.D.

Electronic Signature of Signing Officer/Director Detail

# FILED Jan 14, 2015 Secretary of State CC4083819596

Certificate of Status Desired: Yes

Date

01/14/2015 Date