

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V12638

**Entity Name:** A.K. VIJAPURA, M.D., P.A.

**Current Principal Place of Business:**

802 W DR MLK JR BLVD  
SUIT D  
PLANT CITY, FL 33563

**Current Mailing Address:**

802 W DR MLK JR BLVD  
SUIT D  
PLANT CITY, FL 33563 US

**FEI Number:** 59-3112205

**Certificate of Status Desired:** No

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

VIJAPURA, A.K.  
802 W DR MLK JR BLVD  
SUIT D  
PLANT CITY, FL 33563 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 MDPA  
Name VIJAPURA, A.K.  
Address 802 W DR MLK JR BLVD  
SUIT D  
City-State-Zip: PLANT CITY FL 33563

*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:** ASHIT VIJAPURA MD. PA

MD, PA

04/12/2019

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

\_\_\_\_\_  
Date