

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F17000003542

**Entity Name:** DOCTORFARE, INC.

**Current Principal Place of Business:**

1172 SOUTH DIXIE HWY  
SUITE #280  
CORAL GABLES, FL 33146

**Current Mailing Address:**

1172 SOUTH DIXIE HWY  
SUITE #280  
CORAL GABLES, FL 33146 US

**FEI Number:** 38-4041873

**Certificate of Status Desired:** No

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

LUNA, CARLOS  
1172 SOUTH DIXIE HWY  
SUITE #280  
CORAL GABLES, FL 33146 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:** CARLOS LUNA

01/24/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DPT  
Name LUNA, CARLOS  
Address 1172 SOUTH DIXIE HWY  
SUITE #280  
City-State-Zip: CORAL GABLES FL 33146

*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:** CARLOS LUNA

DPT

01/24/2019

Electronic Signature of Signing Officer/Director Detail

Date