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Mar 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Northcutt
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000057480 (1)

1. Corporation Name
ESPERANZA ARCE-MUNEZ, M.D., P.A.

Principal Place of Business

4980 WEST 10TH AVE.
#208
HIALEAH FL 33012

Mailing Address

4980 WEST 10TH AVE.
#208
HIALEAH FL 33012-3437



2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

07/09/1996

3a. Date of Last Report

4. FEI Number

65-0682987

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒

Yes

☐

No

9. Name and Address of Current Registered Agent

ARCE-NUNEZ, ESPERANZA
4980 WEST 10TH AVENUE
#208
HIALEAH FL 33012

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or registered agent of both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I agree to comply with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

D
NUNEZ-ARCE, ESPERANZA
4980 WEST 10TH AVE. #208
HIALEAH FL 33012

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY- ST- ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY- ST- ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY- ST- ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY- ST- ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY- ST- ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY- ST- ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Esperanza Arce-Nunez 2-18-97 (205) 823-3000

Date

Corporate Phone #

0117327

CR2E034 (9/96)