

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 600117

**Entity Name:** BROWN, DAVILA, KHAN, MAZA, RUIZ & WHIRLEY-DIAZ, M.D.'S,  
P.A.

**FILED**  
**Apr 01, 2025**  
**Secretary of State**  
**2527319074CC**

**Current Principal Place of Business:**

11301 S. DIXIE HWY  
#565037  
PINECREST, FL 33156-7203

**Current Mailing Address:**

11301 S. DIXIE HWY  
#565037  
PINECREST, FL 33156-7203 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: Yes**

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

DAVILA, JOSE J  
11301 S. DIXIE HWY  
#565037  
PINECREST, FL 33156-7203 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: JOSE J DAVILA**

**04/01/2025**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name DAVILA, JOSE J  
Address 11301 S. DIXIE HWY  
#565037  
City-State-Zip: PINECREST FL 33156-7203

Title DIRECTOR  
Name MAZA, JORGE L  
Address 11301 S. DIXIE HWY  
#565037  
City-State-Zip: PINECREST FL 33156-7203

Title DIRECTOR  
Name HAZDAY, NELSON  
Address 11301 S. DIXIE HWY  
#565037  
City-State-Zip: PINECREST FL 33156-7203

*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: JOSE J. DAVILA**

**DIRECTOR**

**04/01/2025**

Electronic Signature of Signing Officer/Director Detail

Date