

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04639

**Entity Name:** RENE J. GOMEZ, M.D., P.A.

**Current Principal Place of Business:**

7400 N KENDALL DR  
SUITE # 511  
MIAMI, FL 33156

**Current Mailing Address:**

7400 N KENDALL DR  
SUITE # 511  
MIAMI, FL 33156

**FEI Number:** 59-2033024

**Certificate of Status Desired:** No

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

MENENDEZ, IRENE EA  
4140 SW 70 COURT  
MIAMI, FL 33155 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:** IRENE R. MENENDEZ EA

03/19/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PD	Title	ST
Name	GOMEZ, RENE J.	Name	GOMEZ, RENE J.
Address	7400 N KENDALL DRIVE SUITE # 511	Address	7400 N KENDALL DRIVE SUITE # 511
City-State-Zip:	MIAMI FL 33156	City-State-Zip:	MIAMI FL 33156

*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:** RENE J. GOMEZ

**PRESIDENT**

03/19/2014

Electronic Signature of Signing Officer/Director Detail

Date