## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K40172

Entity Name: SOUTH FLORIDA PULMONARY & CRITICAL CARE

ASSOCIATES, P.A.

**Current Principal Place of Business:** 

3181 CORAL WAY 2ND FLOOR MIAMI, FL 33145

**Current Mailing Address:** 

200 S. BISCAYNE BLVD. SUITE #2600

MIAMI, FL 33131 US

FEI Number: 65-0081041 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AUERBACH, MARC HESQ. 200 S. BISCAYNE BLVD. SUITE #4410 MIAMI, FL 33131 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 D/P Title D/VP

Name SANCHEZ-MASIQUES, JORGE Name REDONDO, ANDRES A.

Address 3181 CORAL WAY, 2ND FLOOR Address 3181 CORAL WAY, 2ND FLOOR

City-State-Zip: MIAMI FL 33145 City-State-Zip: MIAMI FL 33145

Title S Title T

Name SANCHEZ, DILIAN Name REDONDO, MARIA

Address 3181 COURTWAY, 2ND FLOOR Address 3181 CORAL WAY, 2ND FLOOR

City-State-Zip: MIAMI FL 33145 City-State-Zip: MIAMI FL 33145

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.

Electronic Signature of Signing Officer/Director Detail

FILED Apr 25, 2016

**Secretary of State** 

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