

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K57759

**Entity Name:** CARLOS A. SELEMA, M.D., P.A.

**Current Principal Place of Business:**

747 PONCE DE LEON BLVD.  
# 508 - 510  
CORAL GABLES, FL 33134-2073

**Current Mailing Address:**

529 MINORCA AVENUE  
CORAL GABLES, FL 33134

**FEI Number:** 65-0096829

**Certificate of Status Desired:** No

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

BANDLER, BARRY  
9963 THREE LAKES CIR.  
BOCA RATON, FL 33428-6207 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 PDVS  
Name SELEMA, CARLOS A  
Address 529 MINORCA AVENUE  
City-State-Zip: CORAL GABLES FL 33134

Title T  
Name SELEMA, CARLOS A  
Address 529 MINORCA AVENUE  
City-State-Zip: CORAL GABLES FL 33134

*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 SELEMA

PDVS

03/31/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date