

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K88082

Entity Name: LUIS G. GEADA, M.D.P.A.

Current Principal Place of Business:

LUIS G GEADA MD
3821 SW 107 AVE
MIAMI, FL 33165

Current Mailing Address:

LUIS G GEADA MD
3821 SW 107 AVE
MIAMI, FL 33165

FEI Number: 65-0124648

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LUIS G. GEADA
10595 S.W. 124TH STREET
MIAMI, FL 33133 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
Name GEADA, LUIS G
Address 10595 SW 124TH ST
City-State-Zip: MIAMI FL 33176

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: LUIS G GEADA

MD

01/28/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date