

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L92581

**Entity Name:** LAZARO FRAGA, M.D., P.A.

**Current Principal Place of Business:**

4141 SW 6TH STREET  
MIAMI, FL 33134

**Current Mailing Address:**

7765 NW 48 ST  
SUITE 300  
DORAL, FL 33166 US

**FEI Number:** 65-0212954

**Certificate of Status Desired:** No

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

BEILLY, BRADFORD JESQ.  
1144 SE 3RD AVE  
FORT LAUDERDALE, FL 33316 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 DP  
Name CASANOVA, RENE  
Address 1144 SE 3RD AVENUE  
City-State-Zip: FORT LAUDERDALE FL 33316

*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 CASANOVA

DP

04/09/2019

Electronic Signature of Signing Officer/Director Detail

Date