

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M59600

Entity Name: RAMON M. GARCIA-SEPTIEN M.D., P.A.

Current Principal Place of Business:

1435 W 49TH PLACE
SUITE 504
HIALEAH, FL 33012

Current Mailing Address:

PO BOX 4494
HIALEAH, FL 33014 US

FEI Number: 59-2845903

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARCIA, RAMON M
10185 COLLINS AVE.
#803
BAL HARBOUR, FL 33154 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 DR
Name GARCIA, RAMON M
Address 10185 COLLINS AVE #803
City-State-Zip: BAL HARBOUR FL 33154

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: RAMON GARCIA-SEPTIEN,M.D.

PRESIDENT

04/29/2016

Electronic Signature of Signing Officer/Director Detail

Date