

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M89087

**Entity Name:** FLORIDA DERMATOLOGY ASSOCIATES, INC.

**Current Principal Place of Business:**

5070 MINTON RD NW  
SUITE 5  
PALM BAY, FL 32907

**Current Mailing Address:**

5070 MINTON ROAD NW  
SUITE 3A  
PALM BAY, FL 32907

**FEI Number:** 59-2896023

**Certificate of Status Desired:** Yes

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

MORENO, RUBEN A  
812 OAK PARK DRIVE  
MELBOURNE, FL 32940 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            PRES  
Name            MORENO, RUBEN A  
Address        812 OAK PARK DRIVE  
City-State-Zip: MELBOURNE FL 32940

*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:** RUBEN MORENO

**PRESIDENT**

**01/15/2020**

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

\_\_\_\_\_  
Date