

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000010139

Entity Name: ILEANA FUENTES, M.D., P.A.

Current Principal Place of Business:

4343 WEST FLAGLER ST
210
MIAMI, FL 33134

Current Mailing Address:

4343 WEST FLAGLER ST
210
MIAMI, FL 33134 US

FEI Number: 65-0976412

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FUENTES, ILEANA
3150 S.W. 108 AVE
MIAMI, FL 33165 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 P
Name FUENTES, ILEANA
Address 3150 S.W. 108TH AVENUE
City-State-Zip: MIAMI FL 33165

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: ILEANA FUENTES

P

03/09/2015

Electronic Signature of Signing Officer/Director Detail

Date