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.

D

SIGNATURE: VICTOR JIMENEZ

Electronic Signature of Signing Officer/Director Detail

Current Mailing Address:	
1321 NW 14TH STREET	

Entity Name: HECTOR B. JIMENEZ, M.D., P.A.

Current Principal Place of Business:

1321 NW 14TH STREET STE 101 MIAMI, FL 33125 US

1321 NW 14TH STREET

STE 101 MIAMI, FL 33125

DOCUMENT# P00000013269

FEI Number: 65-0985536

Name and Address of Current Registered Agent:

JIMENEZ, HECTOR B 1321 NW 14TH STREET STE 101 MIAMI, FL 33125 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

Officer/Director Detail :

City-State-Zip: MIAMI FL 33125

Title	PT	Title	S
Name	JIMENEZ, HECTOR M.D.	Name	JIMENEZ, MARIA
Address	1321 NW 14TH STREET STE 101	Address	1321 NW 14TH STREET STE 101
City-State-Zip:	MIAMI FL 33125	City-State-Zip:	MIAMI FL 33125
Title	D		
Name	JIMENEZ, VICTOR		
Address	1321 NW 14TH STREET STE 101		

Certificate of Status Desired: No

FILED Jun 17, 2020 Secretary of State 5097230274CC

Date

06/17/2020

Date