

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000085412

Entity Name: PEDRO F. CASANOVA, M.D., P.A.

Current Principal Place of Business:

2013 S MCCALL ROAD
ENGLEWOOD, FL 34223

Current Mailing Address:

PO BOX 2128
ENGLE WOOD, FL 34295-2128

FEI Number: 65-1127194

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASANOVA, PEDRO FM.D.
2013 S MCCALL ROAD
ENGLEWOOD, FL 34223 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 PRESIDENT
Name CASANOVA, PEDRO FERNANDO MD
Address PO BOX 2128
City-State-Zip: ENGLEWOOD FL 34295-2128

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: PEDRO FERNANDO CASANOVA MD

PRESIDENT

04/30/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date