

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000005341

**Entity Name:** GLADYS A. CARDENAS, P.A.

**Current Principal Place of Business:**

829 NE 79 STREET  
MIAMI, FL 33138

**FILED**  
**Feb 26, 2014**  
**Secretary of State**  
**CC0594958496**

**Current Mailing Address:**

829 NE 79 STREET  
MIAMI, FL 33138

**FEI Number: 26-0017059**

**Certificate of Status Desired: No**

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

CARDENAS, GLADYS A  
829 NE 79 STREET  
MIAMI, FL 33138 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 PVST  
Name CARDENAS, GLADYS AESQ  
Address 829 NE 79 STREET  
City-State-Zip: MIAMI FL 33138

Title D  
Name CARDENAS, GLADYS AESQ  
Address 829 NE 79 STREET  
City-State-Zip: MIAMI FL 33138

*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: GLADYS A CARDENAS**

**PRESIDENT**

**02/26/2014**

Electronic Signature of Signing Officer/Director Detail

Date