

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000022112

**Entity Name:** JORGE L. ALSINA MD, PA

**Current Principal Place of Business:**

4999 WEST 8 AVENUE  
SUITE 26  
HIALEAH, FL 33012

**Current Mailing Address:**

5590 WEST 8TH AVENUE  
HIALEAH, FL 33012

**FEI Number:** 03-0395607

**Certificate of Status Desired:** No

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

ALSINA, JORGE L  
5590 WEST 8TH AVENUE  
HIALEAH, FL 33012 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 PD  
Name ALSINA, JORGE L  
Address 5590 WEST 8TH AVENUE  
City-State-Zip: HIALEAH FL 33012

Title VD  
Name ECHEVARRIA, IDANIA  
Address 5590 WEST 8TH AVENUE  
City-State-Zip: HIALEAH FL 33012

*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:** JORGE L ALSINA

PD

01/26/2023

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

\_\_\_\_\_  
Date