

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000065056

Entity Name: MANUEL A. OJEDA, MD, P.A.

Current Principal Place of Business:

6039 COLLINS AVE. #311
MIAMI BEACH, FL 33140

Current Mailing Address:

6039 COLLINS AVE. #311
MIAMI BEACH, FL 33140

FEI Number: 01-0720868

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HEREDIA, JORGE DCPA
1428 SW 124 PL
MIAMI, FL 33184 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 OJEDA, MANUEL AMD
Address 6039 COLLINS AVE. #311
City-State-Zip: MIAMI BEACH FL 33140

Title SD
Name JIMENEZ, ALEXANDRA
Address 6039 COLLINS AVE. #311
City-State-Zip: MIAMI BEACH FL 33140

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: JIMENEZ, ALEXANDRA

SD

02/21/2015

Electronic Signature of Signing Officer/Director Detail

Date