

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000079753

Entity Name: GULF COAST ALLERGY CENTER, P.A.

Current Principal Place of Business:

3400 TAMIAMI TRAIL
SUITE 201
PORT CHARLOTTE, FL 33952

Current Mailing Address:

1328 ALPINIA ROAD
NORTH PORT, FL 34288 US

FEI Number: 82-0551665

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHANDRAHASA, USHA
1328 ALPINIA ROAD
NORTH PORT, FL 34288 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 CHANDRAHASA, USHA
Address 3400 TAMIAMI TRAIL, SITE 201
City-State-Zip: PORT CHARLOTTE FL 33952

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: USHA CHANDRAHASA

PVST

04/29/2019

Electronic Signature of Signing Officer/Director Detail

Date