

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000103627

**Entity Name:** ARSENIO ARABITG, O.D., P.A.

**Current Principal Place of Business:**

620 W 49 ST  
HIALEAH, FL 33012

**Current Mailing Address:**

8365 SW 187 TERR  
MIAMI, FL 33157 US

**FEI Number: 20-0242445**

**Certificate of Status Desired: No**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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	Title	STD
Name	ARABITG, ARSENIO OD	Name	ARABITG, DEBORAH R
Address	620 W 49 ST	Address	620 W 49 ST
City-State-Zip:	HIALEAH FL 33012	City-State-Zip:	MIAMI 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: ARSENIO ARABITG**

**PRESIDENT**

**04/26/2014**

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

\_\_\_\_\_  
Date