

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000051999

Entity Name: CARLOS A. LABRADOR, M.D., P.A.

Current Principal Place of Business:

6775 CROSSWINDS DR. N.
ST PETERSBURG, FL 33710

Current Mailing Address:

6775 CROSSWINDS DR. N.
ST PETERSBURG, FL 33710 US

FEI Number: 20-0953572

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LABRADOR, KITTY T
6775 CROSSWINDS DR. N.
ST PETERSBURG, FL 33710 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 STD
Name LABRADOR, CARLOS A MD
Address 6775 CROSSWINDS DR. N.
City-State-Zip: ST PETERSBURG FL 33710

Title PD
Name LABRADOR, CARLOS AM.D.
Address 6775 CROSSWINDS DR. N.
City-State-Zip: ST PETERSBURG FL 33710

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: CARLOS LABRADOR

PRESIDENT

01/22/2019

Electronic Signature of Signing Officer/Director Detail

Date