

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000029409

**Entity Name:** ANDRES BUSTILLO, M.D., P.A.

**Current Principal Place of Business:**

6705 RED ROAD  
SUITE 602  
CORAL GABLES, FL 33143

**Current Mailing Address:**

6705 RED ROAD  
SUITE 602  
CORAL GABLES, FL 33143 US

**FEI Number:** 20-2463948

**Certificate of Status Desired:** No

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

ALFREDO GARCIA-MENOCAL, P.A.  
730 NW 107TH AVENUE SUITE 115  
MIAMI, FL 33172 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            PRESIDENT  
Name            BUSTILLO, ANDRES DR.  
Address        6705 RED ROAD  
                  SUITE 602  
City-State-Zip: CORAL GABLES FL 33143

*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:** ANDRES BUSTILLO LOPEZ

**PRESIDENT**

**04/27/2017**

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

\_\_\_\_\_  
Date