

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000100646

**Entity Name:** JAVIER FARACH, MD, P.A.

**Current Principal Place of Business:**

1545 HAND AVENUE  
SUITE B1  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

1545 HAND AVENUE  
SUITE B1  
ORMOND BEACH, FL 32174 US

**FEI Number:** 90-0081053

**Certificate of Status Desired:** No

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

CARLOS, FARACH J DR.  
5 SANTA LUCIA AVENUE  
ORMOND BEACH, FL 32174 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:** CARLOS J FARACH

02/12/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            FARACH, CARLOS J MD  
Address         5 SANTA LUCIA AVE  
City-State-Zip: ORMOND BEACH FL 32174

*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 FARACH

PRESIDENT

02/12/2023

Electronic Signature of Signing Officer/Director Detail

Date