### 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000051765

Entity Name: ALICIA MATAYOSHI, D.M.D., P.A.

#### **Current Principal Place of Business:**

7807 BAYMEADOWS ROAD E 304 JACKSONVILLE, FL 32256

## **Current Mailing Address:**

7807 BAYMEADOWS ROAD E 304 JACKSONVILLE, FL 32256

#### FEI Number: 26-0902871

# Name and Address of Current Registered Agent:

MATAYOSHI, ALICIA DMD 7807 BAYMEADOWS ROAD E 304 JACKSONVILLE, FL 32256 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

#### Officer/Director Detail :

 
 Title
 DMD

 Name
 MATAYOSHI, ALICIA D.M.D.

 Address
 7807 BAYMEADOWS ROAD E SUITE 304

 City-State-Zip:
 JACKSONVILLE FL 32256

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.

PRES

SIGNATURE: DR ALICIA MATAYOSHI

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date

04/23/2024