

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000001914

**Entity Name:** GONZALO CORTES, D.M.D., P.A.

**Current Principal Place of Business:**

350 SOUTH MIAMI AVENUE  
APT# 1202  
MIAMI, FL 33130

**Current Mailing Address:**

350 SOUTH MIAMI AVENUE  
APT# 1202  
MIAMI, FL 33130

**FEI Number:** 26-1708528

**Certificate of Status Desired:** No

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

FABRICANT & COMPANY, PA  
3252 NE 1ST AVENUE  
SUITE 200  
MIAMI, FL 33137 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:** MICHAEL FABRICANT

03/10/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name CORTES, GONZALO  
Address 350 SOUTH MIAMI AVENUE APT #1202  
City-State-Zip: MIAMI FL 33130

*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:** GONZALO CORTES

P

03/10/2023

Electronic Signature of Signing Officer/Director Detail

Date