

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000008741

**Entity Name:** MANUEL FRADE M.D. P.A.

**Current Principal Place of Business:**

8080 WEST FLAGLER STREET  
1-B  
MIAMI, FL 33144

**Current Mailing Address:**

8080 WEST FLAGLER STREET  
1-B  
MIAMI, FL 33144 US

**FEI Number:** 59-2688210

**Certificate of Status Desired:** No

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

FRADE, MANUEL H.  
8080 WEST FLAGLER STREET  
1-B  
MIAMI, FL 33144 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:** MANUEL H. FRADE

03/22/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name FRADE, MANUEL HDR  
Address 8080 WEST FLAGLER STREET, STE 1-B  
City-State-Zip: MIAMI FL 33144

*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:** MANUEL H FRADE

MEDICAL DOCTOR

03/22/2023

Electronic Signature of Signing Officer/Director Detail

Date