

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000017979

**Entity Name:** JACOB PEDRAZA, D.M.D., P.A.

**Current Principal Place of Business:**

2638 NARNIA WAY  
SUITE 102  
LAND O LAKES, FL 34638

**Current Mailing Address:**

2638 NARNIA WAY  
SUITE 102  
LAND O LAKES, FL 34638

**FEI Number:** 26-2047550

**Certificate of Status Desired:** No

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

PEDRAZA, CHRISTINA FSEC  
2638 NARNIA WAY  
SUITE 102  
LAND O LAKES, FL 34638 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 P  
Name PEDRAZA, JACOB  
Address 1020 STELLA VARA DR.  
City-State-Zip: LTZ FL 33548

Title S  
Name PEDRAZA, CHRISTINA F  
Address 2638 NARNIA WAY  
SUITE 102  
City-State-Zip: LAND O LAKES FL 34638

Title D  
Name PEDRAZA, JACOB  
Address 2638 NARNIA WAY  
SUITE 102  
City-State-Zip: LAND O LAKES FL 34638

*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:** JACOB PEDRAZA

**PRESIDENT**

**01/31/2023**

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

\_\_\_\_\_  
Date