

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000107161

Entity Name: HECTOR VILA, MD, P.A.

Current Principal Place of Business:

4304 W. AZEELE ST.
TAMPA, FL 33609

Current Mailing Address:

4304 W. AZEELE ST.
TAMPA, FL 33609

FEI Number: 26-3721021

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NATHAN L. TOWNSEND, PA
9385 N. 56TH STREET, STE. 202
TAMPA, FL 33617 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 DR.
Name VILA, HECTOR JR.
Address 4304 W AZEELE ST
City-State-Zip: TAMPA FL 33609

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: HECTOR VILA

OWNER

01/22/2016

Electronic Signature of Signing Officer/Director Detail

Date