

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000004359

Entity Name: PAUL LOUIS, M.D., P.A.

Current Principal Place of Business:

21249 HARROW CT
BOCA RATON, FL 33433

Current Mailing Address:

21249 HARROW CT
BOCA RATON, FL 33433 US

FEI Number: 26-4133995

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOUIS, M.D., P.A., PAUL
21249 HARROW CT
BOCA RATON, FL 33433 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 D
Name LOUIS, PAUL
Address 21249 HARROW CT
City-State-Zip: BOCA RATON FL 33433

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: PAUL LOUIS

PRESIDENT

03/30/2018

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date