

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000025002

**Entity Name:** RAMON HUGO SANCHEZ M.D. PA

**Current Principal Place of Business:**

4600 N HABANA AVE  
SUITE 32  
TAMPA, FL 33614

**FILED**  
**Apr 29, 2014**  
**Secretary of State**  
**CC2775383546**

**Current Mailing Address:**

4600 N HABANA AVE  
SUITE 32  
TAMPA, FL 33614 US

**FEI Number:** 27-5547710

**Certificate of Status Desired:** No

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

MILLS, GLORIA J  
3708 W. BAY TO BAY BLVD  
TAMPA, FL 33629 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	Title	VP
Name	SANCHEZ, RAMON H	Name	SANCHEZ, JULIE A
Address	4417 GULFWINDS DR	Address	4417 GULFWINDS DR
City-State-Zip:	LUTZ FL 33558	City-State-Zip:	LUTZ FL 33558

*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:** RAMON HUGO SANCHEZ

**PRESIDENT**

**04/29/2014**

Electronic Signature of Signing Officer/Director Detail

Date