

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000073184

**FILED**  
**Mar 12, 2023**  
**Secretary of State**  
**9216464418CC**

**Entity Name:** ZAMIP PATEL, MD UROLOGY AND ANDROLOGY CONSULTING,  
P.A.

**Current Principal Place of Business:**

11954 NARCOOSSEE RD  
SUITE 2-106  
ORLANDO, FL 32832

**Current Mailing Address:**

11954 NARCOOSSEE RD  
SUITE 2-106  
ORLANDO, FL 32832 US

**FEI Number: 45-3012027**

**Certificate of Status Desired: No**

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

JAMBUSARIA, AMI  
10601 LAGO BELLA DR.  
ORLANDO, FL 32832 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	MR.	Title	MRS.
Name	PATEL, ZAMIP	Name	JAMBUSARIA, AMI H
Address	10601 LAGO BELLA DR.	Address	10601 LAGO BELLA DR.
City-State-Zip:	ORLANDO FL 32832	City-State-Zip:	ORLANDO FL 32832

*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: ZAMIP PATEL** \_\_\_\_\_

**PRESIDENT, OWNER**

**03/12/2023**

Electronic Signature of Signing Officer/Director Detail

Date