

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000097662

Entity Name: LAZARO HARLEY MARTINEZ, M.D., P.A.

Current Principal Place of Business:

510 SW 136 PL
MIAMI, FL 33184

Current Mailing Address:

510 SW 136 PL
MIAMI, FL 33184 US

FEI Number: 45-3803941

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTINEZ, DORA M
510 SW 136 PL
MIAMI, FL 33184 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 MARTINEZ, LAZARO H
Address 510 SW 136 PL
City-State-Zip: MIAMI FL 33184

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: LAZARO HARLEY MARTINEZ

MD

03/13/2017

Electronic Signature of Signing Officer/Director Detail

Date