

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000101866

**Entity Name:** ADELBERT D. CABRERA, MD, PA

**Current Principal Place of Business:**

10336 CREPE JASMINE LANE  
FORT MYERS, FL 33913

**Current Mailing Address:**

10336 CREPE JASMINE LANE  
FORT MYERS, FL 33913 US

**FEI Number:** 45-3948827

**Certificate of Status Desired:** No

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

THE LAW OFFICES OF JEFF COHEN, PA  
909 SE 5TH AVE  
SUITE 200  
DELRAY BEACH, FL 33483 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 PTSD  
Name CABRERA, ADELBERT D  
Address 10336 CREPE JASMINE LANE  
City-State-Zip: FORT MYERS FL 33913

*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:** ADELBERT D. CABRERA

PTSD

06/21/2017

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date