

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000010587

Entity Name: SOMA MEDICAL CENTER PA #5

Current Principal Place of Business:

3255 FOREST HILL BLVD
107
WEST PALM BEACH, FL 33406

Current Mailing Address:

3255 FOREST HILL BLVD
103
WEST PALM BEACH, FL 33406 US

FEI Number: 46-1945862

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NUNEZ, RAFAEL
3255 FOREST HILL BLVD
103
WEST PALM BEACH, FL 33406 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 NUNEZ, RAFAEL
Address 13628 QUARTER HORSE TRAIL
City-State-Zip: WELLINGTON FL 33414

Title S
Name NUNEZ, JACQUELINE
Address 13628 QUARTER HORSE TRAIL
City-State-Zip: WELLINGTON FL 33414

Title CFO
Name NUNEZ, CATALINA
Address 3255 FOREST HILL BLVD STE 103
City-State-Zip: WEST PALM BEACH FL 33406

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: NUNEZ, RAFAEL

PRESIDENT

02/05/2024

Electronic Signature of Signing Officer/Director Detail

Date