

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000008407

Entity Name: FY MEDICAL INSTITUTE INC

Current Principal Place of Business:

330 SW 27TH AVE
703
MIAMI, FL 33135

Current Mailing Address:

330 SW 27TH AVE
703
MIAMI, FL 33135 US

FEI Number: 46-4747982

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CASTILLO, FAUSTO P
330 SW 27TH AVE
703
MIAMI, FL 33135 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	P
Name	CASTILLO, FAUSTO P	Name	CASTILLO, FAUSTO P
Address	330 SW 27TH AVE 703	Address	330 SW 27TH AVE 703
City-State-Zip:	MIAMI FL 33135	City-State-Zip:	MIAMI FL 33135
Title	VP		
Name	FALCON, ROBERTO		
Address	330 SW 27TH AVE 703		
City-State-Zip:	MIAMI FL 33135		

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: FAUSTO P CASTILLO

P

04/26/2016

Electronic Signature of Signing Officer/Director Detail

Date