

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000031815

Entity Name: CARLOS H SILVA M.D. P.A.

Current Principal Place of Business:

5959 P.W.A. DRIVE
CUMMING, GA 30041

Current Mailing Address:

5959 P.W.A. DRIVE
CUMMING, GA 30041 US

FEI Number: 46-5347869

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SILVA, CARLOS H
7750 SW 117TH AVE
SUITE 203
MIAMI, FL 33183 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 PRESIDENT
Name SILVA, CARLOS H
Address 5959 P.W.A.DRIVE
City-State-Zip: CUMMING GA 30041

Title VP
Name SILVA, JAIME LYNN
Address 5959 P.W.A. DRIVE
City-State-Zip: CUMMING GA 30041

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: CARLOS H SILVA

PRESIDENT

03/17/2025

Electronic Signature of Signing Officer/Director Detail

Date