# 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000080595

#### Entity Name: PHYSICIAN PRIMARY CARE CORP

### **Current Principal Place of Business:**

2907 41 ST WEST LEHIGH ACRES. FL 33971

# **Current Mailing Address:**

2907 41 ST WEST LEHIGH ACRES. FL 33971 US

# FEI Number: 47-1998052

### Name and Address of Current Registered Agent:

MIAMI TAX AND ACCOUNTING MANAGEMENT SERVICES INC 18901 SW 106 AVE A - 103 MIAMI,, FL 33157 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:	TALMAY DIAZA	04/25/2018
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Electronic Signature of Registered Agent

## **Officer/Director Detail :**

Title D Name FERNANDEZ, CARMEN M Address 2907 41 ST WEST City-State-Zip: LEHIGH ACRES FL 33971

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: CARMEN M FERNANDEZ PRES 04/25/20	:018
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Electronic Signature of Signing Officer/Director Detail

FILED Apr 25, 2018 Secretary of State CC1017706680

Certificate of Status Desired: No

Date

Date