## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000004761

Entity Name: DANIEL CALVA-CERQUEIRA, M.D., P.A.

**Current Principal Place of Business:** 

600 GRAPETREE DRIVE APT 4CS KEY BISCAYNE. FL 33149

## **Current Mailing Address:**

600 GRAPETREE DRIVE APT 4CS KEY BISCAYNE. FL 33149 US

FEI Number: 47-2941565 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CALVA-CERQUEIRA, DANIEL M.D. 600 GRAPETREE DRIVE APT 4CS KEY BISCAYNE, FL 33149 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

FILED Apr 02, 2019

**Secretary of State** 

9166587829CC

## Officer/Director Detail:

Title PSTD

Name CALVA-CERQUEIRA, DANIEL M.D.
Address 600 GRAPETREE DRIVE APT 4CS

City-State-Zip: KEY BISCAYNE FL 33149

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.