

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000022345

**Entity Name:** RAQUEL C. PINO, D.M.D., P.A.

**Current Principal Place of Business:**

6291 SW 15 STREET  
MIAMI, FL 33144

**FILED**  
**Apr 24, 2018**  
**Secretary of State**  
**CC9641303449**

**Current Mailing Address:**

6291 SW 15 STREET  
MIAMI, FL 33144 US

**FEI Number: 47-3354958**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

PINO, RAQUEL C  
6291 SW 15 STREET  
MIAMI, FL 33144 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            PINO, RAQUEL C  
Address        6291 SW 15 STREET  
City-State-Zip: MIAMI FL 33144

Title            VP  
Name            PINO, DAVID IGNACIO  
Address        6291 SW 15 STREET  
City-State-Zip: MIAMI FL 33144

*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: DAVID PINO**

**VICE PRESIDENT**

**04/24/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date