

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000031202

**Entity Name:** HORTENSIA VALERON MD PA

**Current Principal Place of Business:**

1172 SOUTH DIXIE HWY  
411  
CORAL GABLES, FL 33146

**Current Mailing Address:**

1172 SOUTH DIXIE HWY  
411  
MIAMI, FL 33133 US

**FEI Number:** 47-3973020

**Certificate of Status Desired:** No

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

VALERON, HORTENSIA  
1172 SOUTH DIXIE HWY  
411  
CORAL GABLES , FL 33146 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:** HORTENSIA VALERON

02/13/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name VALERON, HORTENSIA MD  
Address 4190 POINCIANA AVE  
City-State-Zip: MIAMI FL 33133

*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:** HORTENSIA VALERON

MD

02/13/2017

Electronic Signature of Signing Officer/Director Detail

Date