

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000054554

Entity Name: LUIS CHAVES, M.D., P.A.

Current Principal Place of Business:

855 BAYSIDE LANE
WESTON, FL 33326

FILED
Feb 17, 2017
Secretary of State
CC1459150314

Current Mailing Address:

855 BAYSIDE LANE
WESTON, FL 33326 US

FEI Number: 47-4383190

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAMERO PUERTO, GIOVANNA
855 BAYSIDE LANE
WESTON, FL 33326 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 P
Name CHAVES VILLAMIL, LUIS G
Address 855 BAYSIDE LANE
City-State-Zip: WESTON FL 33326

Title D
Name CAMERO PUERTO, GIOVANNA
Address 855 BAYSIDE LANE
City-State-Zip: WESTON FL 33326

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: GIOVANNA CAMERO PUERTO

DIRECTOR

02/17/2017

Electronic Signature of Signing Officer/Director Detail

Date