

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000082445

**Entity Name:** ALVAREZ DIAZ PEDIATRICS, CORP.

**Current Principal Place of Business:**

7235 CORAL WAY  
214  
MIAMI, FL 33155

**Current Mailing Address:**

7235 CORAL WAY  
214  
MIAMI, FL 33155 US

**FEI Number:** 81-4115636

**Certificate of Status Desired:** No

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

ALVAREZ DIAZ, RAMIRO DR.  
7235 CORAL WAY  
214  
MIAMI, FL 33155 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 ALVAREZ DIAZ, RAMIRO DR.  
Address 7235 CORAL WAY  
214  
City-State-Zip: MIAMI FL 33155

*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:** ALVAREZ DIAZ , RAMIRO , DR.

P

02/02/2017

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

\_\_\_\_\_  
Date