

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000063858

Entity Name: ROIG ANESTHESIA, P.A.

Current Principal Place of Business:

650 WEST AVE
804
MIAMI BEACH, FL 33139

Current Mailing Address:

650 WEST AVE
804
MIAMI BEACH, FL 33139 US

FEI Number: 83-1385956

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROIG, ANTHONY L
650 WEST AVE
804
MIAMI BEACH, FL 33139 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 PD
Name ROIG, ANTHONY L
Address 650 WEST AVE
804
City-State-Zip: MIAMI BEACH FL 33139

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: ANTHONY ROIG

MGR

02/07/2020

Electronic Signature of Signing Officer/Director Detail

Date