

**2026 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P22000023887

**Entity Name:** RONYA SILMI,M.D., P.A.

**Current Principal Place of Business:**

10731 DOWRY AVE  
TAMPA, FL 33615

**FILED**  
**Apr 15, 2026**  
**Secretary of State**  
**9932120829CC**

**Current Mailing Address:**

10731 DOWRY AVE  
TAMPA, FL 33615 US

**FEI Number: 88-1749700**

**Certificate of Status Desired: No**

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

HULSEY, SMITH  
ONE INDEPENDENT DRIVE, SUITE 3300  
JACKSONVILLE, FL 32202 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            D  
Name            SILMI, RONYA  
Address        10731 DOWRY AVE  
City-State-Zip: TAMPA FL 33615

Title            P, TS  
Name            SILMI, RONYA  
Address        10731 DOWRY AVE  
City-State-Zip: TAMPA FL 33615

*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: RONYA SILMI**

**PRESIDENT**

**04/15/2026**

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

\_\_\_\_\_  
Date