

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000071664

Entity Name: PRIMARY MEDICAL CARE - R. AYALA, MD, PA

Current Principal Place of Business:

13438 FORT KING RD
DADE CITY, FL 33525

Current Mailing Address:

13438 FORT KING RD
DADE CITY, FL 33525

FEI Number: 59-3210086

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GUEVARA, HECTOR E
13438 FORT KING RD
DADE CITY, FL 33525 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 PST
Name GUEVARA, HECTOR EM.D.
Address 13438 FORT KING RD
City-State-Zip: DADE CITY FL 33525

Title CEOT
Name COMFORT , BOBBIE I
Address 13438 FORT KING DRIVE
City-State-Zip: DADE CITY FL 33525

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: HECTOR E GUEVARA

PST

04/24/2019

Electronic Signature of Signing Officer/Director Detail

Date