

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000045565

Entity Name: RAMON MOREDA, M.D., P.A.

Current Principal Place of Business:

5734 RIVIERA DR
CORAL GABLES, FL 33146

Current Mailing Address:

PO BOX 141219
MIAMI, FL 33114

FEI Number: 65-0500028

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOREDA, RAMON M.D.
5734 RIVIERA DR
CORAL GABLES, FL 33146 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 MOREDA, RAMON M.D.
Address 5734 RIVIERA DR
City-State-Zip: CORAL GABLES FL 33146

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: RAMON MOREDA M.D.

D

02/12/2019

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date