

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000064529

**Entity Name:** MOHANAD A. ELTAHIR, DPM, PA

**Current Principal Place of Business:**

3800 W 12TH AVE  
HIALEAH, FL 33012

**Current Mailing Address:**

3800 W 12 AVENUE  
HIALEAH , FL 33012 US

**FEI Number:** 65-0683578

**Certificate of Status Desired:** No

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

ELTAHIR, MOHANAD A  
4207 S DALE MABRY HWY, 1209  
TAMPA, FL 33611 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:** MOHANAD ELTAHIR, DPM

03/24/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PSTD  
Name ELTAHIR, MOHANAD A  
Address 4207 S DALE MABRY HWY, 1209  
City-State-Zip: TAMPA FL 33611

*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:** MOHANAD A. ELTAHIR

PSTD

03/24/2020

Electronic Signature of Signing Officer/Director Detail

Date