

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000013985

**Entity Name:** LUIS A. SANCHEZ, D.M.D., & ASSOCIATES, P.A.

**Current Principal Place of Business:**

401 SW 42 AVE  
STE. 302  
MIAMI, FL 33134

**FILED**  
**Jun 13, 2019**  
**Secretary of State**  
**7231947713CC**

**Current Mailing Address:**

401 SW 42 AVE  
STE. 302  
MIAMI, FL 33134 US

**FEI Number:** 65-0747880

**Certificate of Status Desired:** No

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

SANCHEZ, LUIS A DR.  
401 SW 42 AVE  
STE. 302  
MIAMI, FL 33134 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:** LUIS A SANCHEZ

06/13/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DPS	Title	MGR
Name	SANCHEZ, LUIS A DR.	Name	SANCHEZ, MIRTHA
Address	401 SW 42 AVE STE. 302	Address	401 SW 42 AVE STE. 302
City-State-Zip:	MIAMI FL 33134	City-State-Zip:	MIAMI FL 33134

*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:** LUIS A SANCHEZ

**PRESIDENT**

06/13/2019

Electronic Signature of Signing Officer/Director Detail

Date