

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000027646

**Entity Name:** ANTONIO PRADO, M.D., P.A.

**Current Principal Place of Business:**

7522 N. HIMES AVE  
TAMPA, FL 33614

**Current Mailing Address:**

7522 N. HIMES AVE  
TAMPA, FL 33614

**FEI Number:** 59-3439912

**Certificate of Status Desired:** No

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

R. JAMES ROBBINS, JR, .  
101 EAST KENNEDY BOULEVARD  
SUITE 3700  
TAMPA, FL 33602-0000 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 P  
Name PRADO, ANTONIO M.D.  
Address 11615 INNFIELDS DR  
City-State-Zip: ODESSA FL 33556

*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:** PRADO , ANTONIO M.D.

P

01/14/2014

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

\_\_\_\_\_  
Date