

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000012354

**Entity Name:** EDUARDO G. BARROSO, M.D., P.A.

**Current Principal Place of Business:**

6141 SUNSET DRIVE, STE 100  
C/O EDUARDO BARROSO MD  
SOUTH MIAMI, FL 33143

**Current Mailing Address:**

6141 SUNSET DRIVE, STE 100  
C/O EDUARDO BARROSO MD  
SOUTH MIAMI, FL 33143

**FEI Number:** 65-0816976

**Certificate of Status Desired:** No

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

BARROSO, EDUARDO  
6250 SW 128 ST  
PINECREST, FL 33156 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 PVST  
Name BARROSO, EDUARDO  
Address 6141 SUNSET DRIVE, STE 100  
City-State-Zip: SOUTH MIAMI FL 33143

Title D  
Name BARROSO, EDUARDO  
Address 6141 SUNSET DRIVE, STE 100  
City-State-Zip: SOUTH MIAMI FL 33143

*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:** EDUARDO BARROSO

PVST

01/14/2015

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

\_\_\_\_\_  
Date