

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000018823

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

Current Principal Place of Business:

45 NE 9 CT
HOMESTEAD, FL 33030

Current Mailing Address:

45 NE 9 CT
HOMESTEAD, FL 33030

FEI Number: 65-0829674

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MALDONADO, RAMON
45 NE 9 CT
HOMESTEAD, FL 33030 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 PSD
Name MALDONADO, RAMON
Address 45 NE 9 CT
City-State-Zip: HOMESTEAD FL 33030

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 MALDONADO

PRESIDENT

04/26/2017

Electronic Signature of Signing Officer/Director Detail

Date