

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000022454

**Entity Name:** RAMON QUESADA, M.D., P.A.

**Current Principal Place of Business:**

8950 N KENDALL DRIVE  
SUITE 501  
MIAMI, FL 33176

**FILED**  
**Apr 08, 2013**  
**Secretary of State**  
**CC6473295873**

**Current Mailing Address:**

200 S. BISCAYNE BLVD., 6TH FLOOR  
C/O BARRY BRANT  
MIAMI, FL 33131

**FEI Number: 65-0818686**

**Certificate of Status Desired: Yes**

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

BRANT, BARRY MC.P.A.  
200 S BISCAYNE BLVD  
6TH FL  
MIAMI, FL 33131 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 QUESADA, RAMON M.D.  
Address 8950 N KENDALL DRIVE, SUITE 501  
City-State-Zip: MIAMI FL 33176

*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 QUESADA MD**

**OWNER**

**04/08/2013**

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

\_\_\_\_\_  
Date