

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000080275

Entity Name: JULIO A. ENRIQUEZ, M.D., P.A.**Current Principal Place of Business:**8018 HANCOCK ST.
RIVERVIEW, FL 33511-5968**Current Mailing Address:**8018 HANCOCK ST.
RIVERVIEW, FL 33578 US**FEI Number:** 59-3530786**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ENRIQUEZ, JULIO AP
8018 HANCOCK ST.
RIVERVIEW, FL 33578 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	PD
Name	ENRIQUEZ, JULIO A
Address	500 VONDERBURG DR EAST TOWER STE 102
City-State-Zip:	BRANDON FL 33511

Title	SECRETARY, TREASURER
Name	ENRIQUEZ, CARMENZA G
Address	500 VONDERBURG DR EAST TOWER, STE 102
City-State-Zip:	BRANDON FL 33511-5968

Title	TRUSTEE
Name	ENRIQUEZ, ALEJANDRO R
Address	500 VONDERBURG DR EAST TOWER, STE 102
City-State-Zip:	BRANDON FL 33511-5968

Title	ASST. SECRETARY
Name	ENRIQUEZ, AMANDA C
Address	500 VONDERBURG DR EAST TOWER, STE 102
City-State-Zip:	BRANDON FL 33511-5968

Title	ASST. SECRETARY
Name	ENRIQUEZ, TANIA S
Address	500 VONDERBURG DR EAST TOWER, STE 102
City-State-Zip:	BRANDON FL 33511-5968

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: JULIO A ENRIQUEZ**PRESIDENT****03/10/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date