

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000055132

Entity Name: JAVIER FLORES, M.D., P.A.

Current Principal Place of Business:

6705 SW 57TH AVE SUITE 400
MIAMI, FL 33143

Current Mailing Address:

91550 OVERSEAS HWY
SUITE 207
TAVERNIER, FL 33070 US

FEI Number: 65-0929198

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLORES, JAVIER
1535 SUNSET RD
CORAL GABLES, FL 33143 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 PSTD
Name FLORES, JAVIER
Address 1535 SUNSET ROAD
City-State-Zip: CORAL GABLES 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: FLORES, JAVIER

PSDT

04/20/2015

Electronic Signature of Signing Officer/Director Detail

Date