

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000080173

Entity Name: ARELIS M. MADERA, M.D., P.A.

Current Principal Place of Business:

3611 TAMIAMI TRAIL
SUITE B
PORT CHARLOTTE, FL 33952

Current Mailing Address:

3611 TAMIAMI TRAIL
SUITE B
PORT CHARLOTTE, FL 33952

FEI Number: 65-0944689

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MADERA, ARELIS M.D.
3611 TAMIAMI TRAIL
SUITE B
PORT CHARLOTTE, FL 33952 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 MD
Name MADERA, ARELIS MM.D.
Address 3611 TAMIAMI TRAIL, SUITE B
City-State-Zip: PORT CHARLOTTE FL 33952

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: ARELIS MADERA

MD

04/23/2014

Electronic Signature of Signing Officer/Director Detail

Date