

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S61722

Entity Name: RODOLFO E. LAWSON, M.D., P.A.

Current Principal Place of Business:

7100 WEST 20TH AVE
110
HIALEAH, FL 33011

Current Mailing Address:

7100 WEST 20TH AVENUE
110
HIALEAH, FL 33011 US

FEI Number: 58-1945802

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAWSON, RODOLFO EM.D.
7100 WEST 20TH AVENUE
110
HIALEAH, FL 33011 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 D
Name LAWSON, RODOLFO E. DR.
Address 7100 WEST 20TH AVENUE
 110
City-State-Zip: HIALEAH FL 33011

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: RODOLFO E LAWSON MD

OFFICER

03/19/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date