

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S88656

**Entity Name:** CELPA CLINIC, INC.

**Current Principal Place of Business:**

3306 W. SPRUCE ST  
SUITE A  
TAMPA, FL 33607

**Current Mailing Address:**

3306 W. SPRUCE ST  
SUITE A  
TAMPA, FL 33607 US

**FEI Number:** 59-3125149

**Certificate of Status Desired:** Yes

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

CELPA, SONIA M  
3306 W. SPRUCE ST.  
A  
TAMPA, FL 33607 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:** SONIA CELPA

04/17/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name CELPA, SONIA M AP  
Address 3306 WEST SPRUCE ST, SUITE A  
City-State-Zip: TAMPA FL 33607

Title VP  
Name CABRERA, LUZ E DDS  
Address 3306 - W. SPRUCE ST.  
City-State-Zip: TAMPA FL 33607

Title DIRECTOR  
Name RIVAS, SONIA ELENA  
Address 3306 W. SPRUCE ST  
SUITE A  
City-State-Zip: TAMPA FL 33607

*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:** SONIA CELPA

**PRESIDENT**

04/17/2025

Electronic Signature of Signing Officer/Director Detail

Date