

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V69217

Entity Name: VICENTE ROGER M.D.P.A.

Current Principal Place of Business:

1069 KANE CONCOURSE
BAY HARBOR, FL 33154

Current Mailing Address:

1069 KANE CONCOURSE
BAY HARBOR, FL 33154

FEI Number: 65-0356760

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VICENTE ROGER
1069 KANE CONCOURSE
BAY HARBOR, FL 33154 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 VICENTE ROGER, M.D.
Address 1069 KANE CONCOURSE
City-State-Zip: BAY HARBOR FL 33154

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: LAURA ROGER

OFFICE MANAGER

04/30/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date