

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000083559

Entity Name: ODETTE OLIVERAS MD PLLC

Current Principal Place of Business:

4030 TEAL WAY
PENSACOLA, FL 32507

Current Mailing Address:

4030 TEAL WAY
PENSACOLA, FL 32507 US

FEI Number: 46-3019376

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
476 RIVERSIDE AVE.
JACKSONVILLE, FL 32202 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

Authorized Person(s) Detail :

Title MGRM
Name OLIVERAS, ODETTE
Address 4030 TEAL WAY
City-State-Zip: PENSACOLA FL 32507

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ODETTE OLIVERAS

MD

02/28/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date