

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000070609

Entity Name: WEDO MEDICAL CENTER CORP

Current Principal Place of Business:

2215 NW 36TH ST
MIAMI, FL 33142

Current Mailing Address:

2215 NW 36TH ST
MIAMI, FL 33142 US

FEI Number: 87-2047850

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOPEZ, ALFONSO IV
2215 NW 36TH ST
MIAMI, FL 33142 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: ALFONSO LOPEZ IV

02/03/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P	Title	VP
Name	LOPEZ, ALFONSO IV	Name	MARIN, YUSNIEL
Address	2215 NW 36TH ST	Address	2215 NW 36TH ST
City-State-Zip:	MIAMI FL 33142	City-State-Zip:	MIAMI FL 33142

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: ALFONSO LOPEZ IV

PRESIDENT

02/03/2024

Electronic Signature of Signing Officer/Director Detail

Date