

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G28824

FILED
Jun 12, 2012
Secretary of State

Entity Name: AVRIEL COHEN, D.P.M., P.A.

Current Principal Place of Business:

2299 N UNIVERSITY DR.
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

2299 N UNIVERSITY DR.
PEMBROKE PINES, FL 33024

New Mailing Address:

FEI Number: 59-2295749

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, AVRIEL
2299 N. UNIVERSITY DR.
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PST
Name: COHEN, AVRIEL, D.P.M.
Address: 2299 N. UNIVERSITY DR.
City-St-Zip: PEMBROKE PINES, FL

Title: V
Name: COHEN, ELYN
Address: 2299 N. UNIVERSITY DR.
City-St-Zip: PEMBROKE PINES, FL

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: AVRIEL COHEN DPM PA

PST

06/12/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date