

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000066425

Entity Name: DR.NATALIE KOREN, P.A.

FILED  
Jan 15, 2011  
Secretary of State

**Current Principal Place of Business:**

2648 WILSON STREET  
HOLLYWOOD, FL 330201953

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 223592  
HOLLYWOOD, FL 330223592

**New Mailing Address:**

FEI Number: 22-3718637

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KOREN, NATALIE  
2648 WILSON STREET  
HOLLYWOOD, FL 330201953 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: P  
Name: KOREN, NATALIE  
Address: 2648 WILSON STREET  
City-St-Zip: HOLLYWOOD, FL 330201953

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: DR.NATALIE KOREN

P

01/15/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date