

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 490721

**Entity Name:** BECKER & POLIAKOFF, P.A.

**Current Principal Place of Business:**

1 EAST BROWARD BLVD #1800  
FT LAUDERDALE, FL 33301

**Current Mailing Address:**

1 EAST BROWARD BLVD #1800  
FT LAUDERDALE, FL 33301 US

**FEI Number:** 59-1640708

**Certificate of Status Desired:** No

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

LESSER, STEVEN B.  
1 EAST BROWARD BOULEVARD  
SUITE 1800  
FT LAUDERDALE, FL 33301 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 TD  
Name LEVINE, ALLEN M  
Address 1 EAST BROWARD BOULEVARD  
SUITE 1800  
City-State-Zip: FT LAUDERDALE FL 33301

Title PD  
Name ROSEN, GARY C  
Address 1 EAST BROWARD BOULEVARD  
SUITE 1800  
City-State-Zip: FT LAUDERDALE FL 33301

Title SD  
Name LESSER, STEVEN B  
Address 1 EAST BROWARD BOULEVARD  
SUITE 1800  
City-State-Zip: FORT LAUDERDALE FL 33301

*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:** STEVEN B. LESSER

SD

01/08/2024

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date